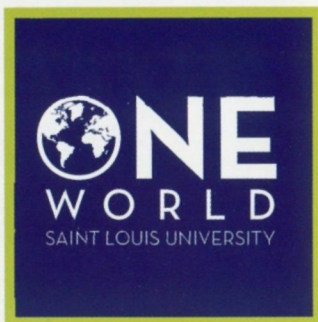


# Be an Informed Neighbor



Fall 2016





**Fall 2016  
Volume 11  
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# Letter from the Editors

Dear Readers,

It is with great pleasure that we present this semester's edition of OneWorld to the SLU and St. Louis community. This fall marks our eleventh year as a student organization, and, while times have changed, our mission remains the same: "to rediscover that, while we are many in our cultures, religions, and struggles, we are one in our common humanity."

In the midst of a year of political turmoil and division, the concept of a "neighbor" seems irrelevant. We side with those we agree with and form barriers against those we do not. Yet, in picking sides, we forget to look around at one another — at our common humanity despite our differences. Our theme this semester, "Be an Informed Neighbor," encourages us to think more broadly about who our neighbors truly are. They are often invisible to us, swallowed by criticism, stigmatization and fear. At times, they seem unreachable, as if there are oceans between our lives and theirs. This semester our writers seek to broaden our understanding of "neighborhood" so that we may open our fences to find that every student has a story and Cuba is only a boat ride away.

The articles in this magazine concern an expansive array of topics that detail life as a child immigrant, assert the failure of the war on drugs and promote free trade coffee. Our writers wrote about struggles behind closed doors, like the silent pain of veterans with PTSD or the centuries-old oppression that comes with being Native American in America. Yet, we also cover "breaking news" in an analysis of counter-terrorism, a snapshot of educational opportunities for refugees and specifics on the Zika virus. The people that these articles concern are not characters in a story; they are our neighbors within our national and international neighborhood.

OneWorld is not simply a magazine but a call to action. We hope that these stories transform you as much as they did us. We hope that they inspire you to question, research and get involved so that we can better recognize the worth in all of our neighbors, despite the injustices in society.

"We yearn to remove the barriers of ignorance and injustice, because the most basic and unchanging truth that unites us is the infinite value of the human person."

liveOneWorld,  
The Editorial Team



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# THE MUTED VOICE OF NATIVE AMERICA



**Justin Seaton**  
*Senior*  
*Communication*

Over 280 Native Americans were gathered in Cannonball, North Dakota in October 2016 to protest the construction of the Dakota Access Pipeline (DAPL) and, once again, the unwelcome advances of the American government onto tribal land.

Local native communities began protesting the pipeline when its construction was first proposed by Energy Transfer Partners in 2014. Opponents of the DAPL say that it risks contaminating the Missouri river, the main source of drinking water for millions of Americans, and that the pipeline's construction will destroy sacred native lands and violate federal policies protecting culturally significant holdings.

Proponents insist that increased production of crude oil is in the best interests of the American people, and that this 1,772-mile-long pipeline is the safest and most efficient way of transferring that oil.

Now, as the largest gathering of native peoples in a century raises their voice against the American oil industry, that voice is simultaneously drilling up some of the stories that sit at the slimy, dark core of the relationship between Native Americans and the U.S. Government.

Candy Boyd, 63, was born and raised in Missouri with Osage and Cherokee ancestry. Her childhood teetered between traditional Native American family values on her mother's side, and the white, upper class background of her step-family. She spent much of her childhood in Southwest Missouri, where her grandmother and great-grandmother grew up in the Osage nation.

"I remember when I was a little girl asking my grandmother, 'If you're Osage, and they're from Missouri, then where are all the other ones?' She just shook her head and said, 'Well, they're all gone,' she said. 'They've all gone. Most of them died and some of

them were moved out to Oklahoma, but they're all gone now.' And she was really, really sad, and I could see that."

After graduating high school, Boyd received a full scholarship to New College in Sarasota, Florida, where she felt a divide between her Native American upbringing and the prep-school-educated wealth of her peers. This alienation impelled Boyd to connect with her native heritage. She volunteered with the United Southeastern Tribes in Sarasota, and conducted independent studies that would take her from local tribal communities all the way to the Choctaw Nation in Oklahoma.

"Actually it was that very first trip to the Choctaw reservation... this young boy had just been shot in the back by a white policeman. When I was 18 years old, which was a long time ago now, I learned about racial profiling."

According to a recent study by the Center on Juvenile and Criminal Justice, more native people are killed per capita by police than any other group in the nation. In spite of this shocking reality, Native American causes seldom find the same footing and support as movements like Black Lives Matter.

"Native Americans probably don't have a voice for one of three reasons," Boyd said. "One, most of them have been killed off. If you're only one percent of the population, you can't get very far. Two, whenever Native Americans stand up, they are oppressed even more. And, three, they are a very peaceful people. They are very loving, they are very forgiving, they are very spiritual.... And if there is a fourth reason, it's depression. They're so busy raising children, supporting their families and trying to put their culture back together given all of the ways in which they are oppressed. Because when people are oppressed, things don't function as they should."

Apryl Joe, 32, spent much of her life outside of the Navajo reservation in New Mexico.

"I was born in the Navajo nation, but by the time I was four years old, my mom moved me off the reservation and into the city... because she knew the education system was lacking resources on the reservation. She wanted more for me. She wanted me to have access to things that you can't really find on the reservation."





*“Because when people are oppressed, things don’t function as they should.”*

*- Candy Boyd*

Joe received her undergraduate degree in sociology from Occidental College in Los Angeles, and returned to New Mexico to work on the Navajo Nation. She has dedicated her life to the empowerment of native communities and advocating for improved support services on reservations.

“When treaties were set up, we were promised certain things by the federal government, and they still might give money and they still might help, but it’s not enough money. It’s not enough resources. The services are really poor,” Joe said.

Many native leaders attribute the disparities on federally held reservations to centuries-old governmental policies that put native people at a disadvantage.

“We have a different relationship than most racial or ethnic minorities do with the federal government,” Joe said. “We are sovereign nations, but there are still a lot of complications around that.”

One such complication in the Native American struggle for sovereignty was the Dawes Severalty Act (1887). Passed into law under president Grover Cleveland, the Dawes Act, also known as the General Allotment Act, split communally held reservations into private portions, which were then conditionally dealt to individuals and their families. The conditions required that native landowners acquire a certain level of self-sufficiency, lest their land be taken back under federal control and re-gifted to white colonizers. As a result, former Native American land holdings were put on the open market, reservations shrunk exponentially and native people were forced more aggressively than ever to assimilate into western society.

“I can trace back a couple generations of how these very oppressive and explicit actions of colonization have affected my family, and even me. There were a number of people coming in and trying to ‘kill the Indian, save the man.’ They were trying to take away our language, our culture, our religion,” Joe said. “My grandparents were taken to boarding schools and went through a really

bad experience.... They weren’t allowed to speak their language; they weren’t allowed to practice certain things; their hair was cut off.”

The assimilationist policies of the late 19th and early 20th century were finally repealed under John Collier, commissioner of the Bureau of Indian affairs (BIA) from 1933-1945. Collier had long studied the inequities of native people and spent much of his career undoing the systemic knot that tied them firmly to the bottom rung of America’s socioeconomic ladder. These efforts culminated in the Indian Reorganization Act, or Indian New Deal, which attempted to re-establish self-government and sovereignty among native nations. Even this, the lone light in the dark past of BIA policies, has been widely criticized by tribal communities. Collier’s intentions were good, but the policy itself did nothing for the economic, educational and health discrepancies of shrinking native communities.

The federal government then spent much of the 20th century working to terminate its relationship with native people by relocating them off of tribal lands and limiting their access to federal funding. These policies of termination rarely worked. Native communities still face an economic handicap and rely heavily on insufficient funding from Washington.

“We still rely a lot on the federal government. We still have a lot of issues in our communities, and until we break out of that relationship and change the way that we’re empowering our people, we’re going to continue to be stuck in the place we are now,” Joe said.

“So now you can write up this article and change it all,” Boyd said at the end of our interview.

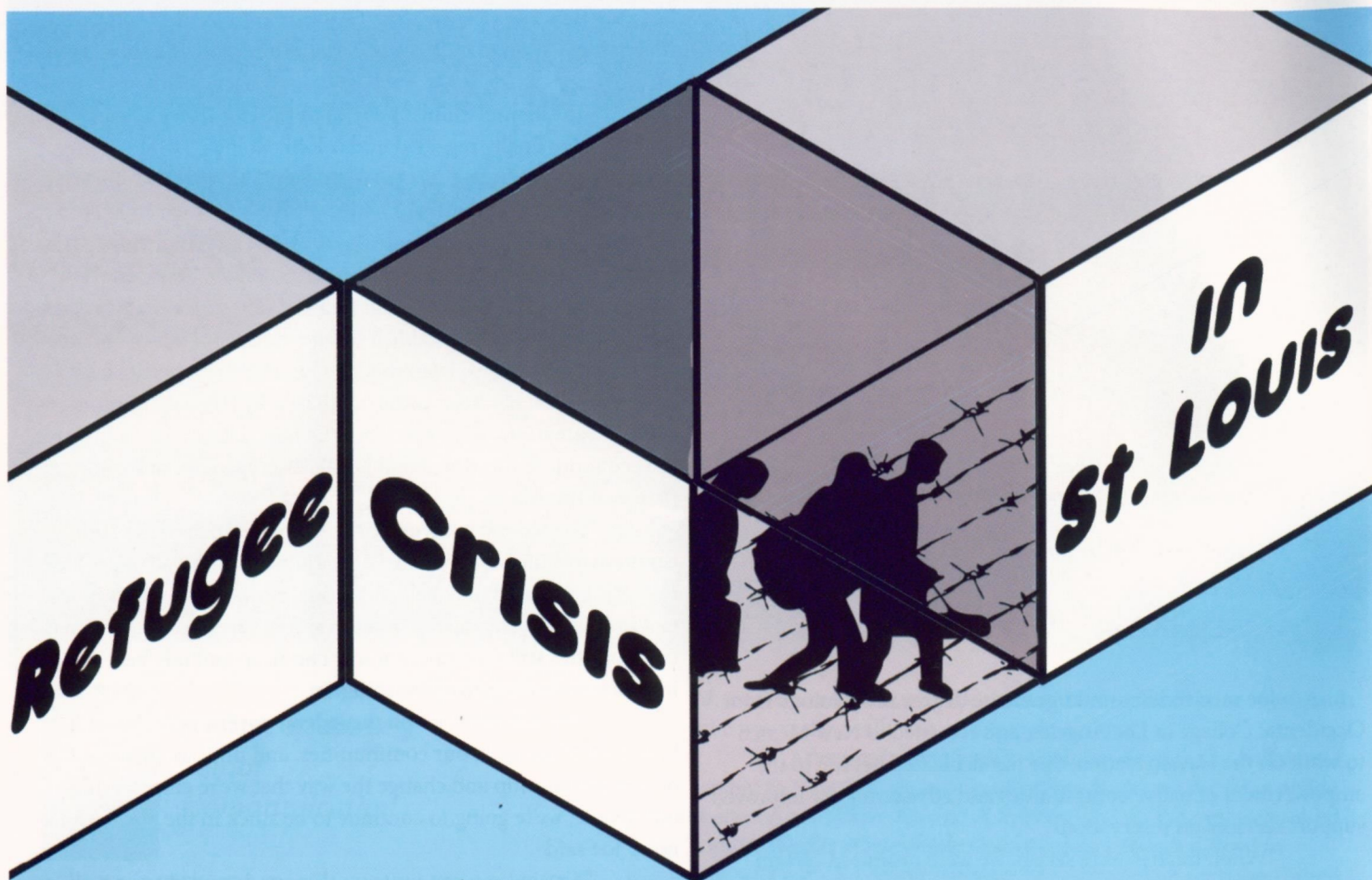
“Of course,” I chuckled hopelessly, knowing my voice is no louder than hers; that it, like the voice of the protesters in Standing Rock, N.D., will bang idly against the ears of a nation that has fallen deaf to the cries of its oldest neighbors.



*“until we... change the way that we’re empowering our people, we’re going to continue to be stuck in the place we are now.”*

*- April Joe*





**Kendra Ruether**  
*Sophomore*  
*Communication*

Moving to a new city is daunting for anyone, but imagine moving to a new city because not doing so would mean persecution and pain for you and your family. Some people have no choice in this matter and do not even get to decide in which city, or even country, they will live. According to the United Nations High Commissioner for Refugees, this is the situation that 15.4 million people in the world are going through today. One St. Louis organization, the International Institute, is trying to make this process easier for refugees who are placed here.

The U.S. Department of State says that a refugee is: "someone who has fled from his or her home country and cannot return because he or she has a well-founded fear of persecution based on religion, race, nationality, political opinion or membership in a particular social group." Unfortunately, as of late, a refugee crisis has broken out in the world, due to the Syrian Civil War and unrest in the Middle East. As a result, Syrians are exhausted and broken-down and cannot gain entrance into Middle Eastern countries, which is why they must come to countries in the European Union and the United States.

The process of gaining entrance into the United States is a complicated one, over which the refugees have no control. Before a refugee can come into the U.S. they must first be given approval by the United Nations. Next, they must go through 13

levels of scrutiny, including background checks, that can take anywhere from one to two years. Finally, they must get a health exam before they can go to the city where they have been placed.

The president of the United States decides how many people the country will welcome. After the number is determined, Congress sets the budget for the eight agencies that deal with resettlement. These agencies then decide how many people can be settled in certain cities based on language and cultural needs. St. Louis is set to receive 1,024 refugees this year, mostly Syrians. This is a large increase from the past couple of years, in which St. Louis welcomed about 650 refugees annually.

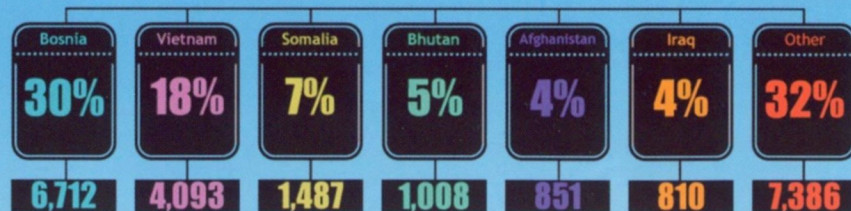
St. Louis is a city known for its diversity and culture. It has joined the Welcoming Cities and Counties Initiative, a national effort that promotes and recognizes the importance of international members of the community, such as refugees and immigrants. For many refugees, this aspect of St. Louis has provided a safe haven when the places they used to call home became places of fear and persecution. Because of its diversity, the St. Louis community is welcoming of refugees, which cannot be said for all cities that receive them. The accepting atmosphere gives hope for a better future for the refugees who are placed here. One St. Louis organization, the International Institute, aims for successful resettlement of refugees through strong community involvement.

The Institute, the largest resettlement site in Missouri and only one in St. Louis, "offers comprehensive adjustment services for refugees and immigrants in the community. In turn, the newcomers expand the richness of St. Louis' diversity and help revitalize our economy."

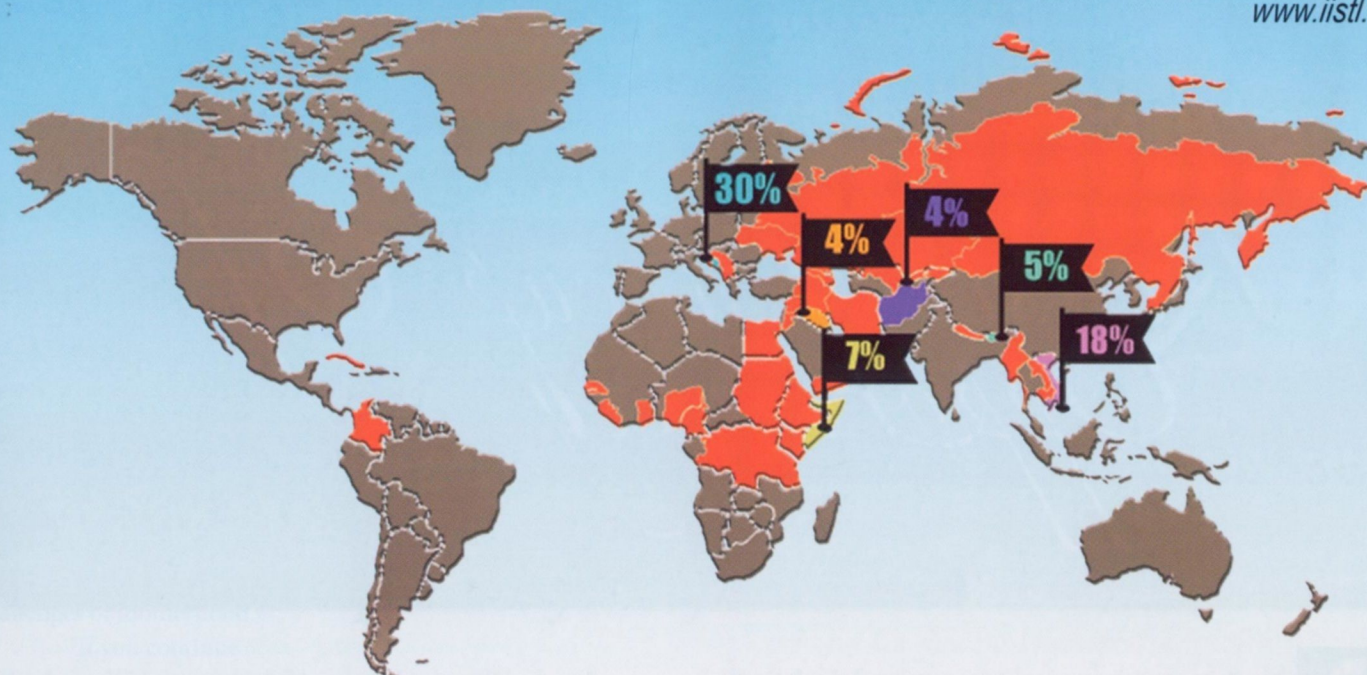


# International Institute of St. Louis Refugees Sponsored

22,347 between 1979-2015



[www.iistl.org](http://www.iistl.org)



The International Institute focuses on the first six months after resettlement by making sure refugees and immigrants find work and some type of financial stability so they can pay rent and afford other necessities. It offers many different types of services that facilitate a successful transition for refugees.

"Well I'm kind of biased," Ariel Burgess, the Vice President and Director of Client Services, said. "I think resettlement is the most important service we offer."

Her bias stems from the fact that she runs the resettlement program at the International Institute. Through this program, Burgess and her employees help newly arrived refugees find homes, jobs and a support system that helps them adjust to life in the U.S. That support can come from members of the community, other refugees, volunteers and employees at the International Institute.

"The only way that we could resettle refugees successfully or adequately is if they have access to social work services, employment, and ESL classes," Burgess said.

Refugees have to look for work 30 days after they arrive, so these services are extremely important. Employment services help the refugees find jobs that are easily accessible and in their skill set. English as a Second Language (ESL) classes help refugees overcome the language barrier, one of the hardest things to do, according to Burgess, especially without any prior knowledge of English. Social work services provide support emotionally and

mentally so that refugees have a smooth transition throughout a very stressful time.

Through her work, Burgess has learned that she would never make it as a refugee. She believes that refugees are stronger than they seem and get a bad reputation as freeloaders because people do not understand the conditions they endure. They must learn a new language and culture, all while finding a job that might be well below their skill set just so that they can provide for their family and afford to stay in the U.S. All of this must be done so that they do not have to go back to their home because it would be

too dangerous to do so. St. Louis is a great place for refugees because it is the fastest growing foreign-born city in the U.S.

**"We are not just a pure, white bread, caucasian community. We are much more diverse than many St. Louisians know."**

"We are not just a pure, white bread, caucasian community. We are much more diverse than many St. Louisians know," said Burgess. "We have almost every population from

A-Z here in St. Louis, which is why the International Institute's work is so important to continue that tradition of diversity."

The International Institute has been working to help refugees from all over the world find a place to call home in St. Louis. That would not be possible without the work of volunteers and community members who embrace and celebrate diversity.

For more information about the International Institute, including how to volunteer, visit [www.iistl.org/volunteer](http://www.iistl.org/volunteer).





# Roasting a cup Of Opportunity



**Tyler Roche**  
*Senior  
Nursing*

You could have asked Virgilia López the day that I met her on her farm what she wanted in life. She probably would not have told you that she wanted charity. On a location 5,900 feet above sea level in San Miguel Escobar, Guatemala, López can be found working from dawn to dusk. López is a coffee farmer whose life changed when she was given economic opportunity thanks to the De la Gente mission.

De la Gente is an initiative developed to promote economic opportunity in order to improve the lives of coffee farmers and their communities in Guatemala. Though it is a “direct trade” organization that buys their coffee directly from the grower instead of a middle-man or certifier, De la Gente has many values that align with those of the World Fair Trade Organization. De la Gente works to achieve their mission through four principal outcomes: economic sustainability, empowerment in the coffee industry, healthy and thriving livelihoods and resilience to shocks in the coffee industry and emergencies. These principles came to life when I traveled to their cooperative in San Miguel Escobar.

According to the World Fair Trade Organization, the fair trade market is a trading partnership based on dialogue, transparency and respect, which seeks greater equity in international trade. It contributes to sustainable development by offering better trading conditions and securing the rights of marginalized producers and

workers — especially in Latin America. Fair trade organizations (backed by consumers) are engaged actively in supporting producers, raising awareness and campaigning for changes in the rules and practice of conventional international trade.

In past years, the fair trade market has gained steam as a major societal movement. Though some recognize the benefits of purchasing fair trade certified coffee, others find the process to be disadvantageous. Various economists in the U.S. see fair trade as a way to abandon free trade. They argue that fair trade orientation benefits only Americans under certain circumstances, creating job insecurity for Americans and loose regulations on imported goods. According to the Council on Foreign Relations, the free trade (versus fair trade) orientation strongly benefits the American economy and foreign policy. However, there is something about the fair trade orientation that resonates well with American citizens. I have seen firsthand how the benefits on a family surpass any additional cost of coffee.

I had the privilege of visiting the home of López through De la Gente in March 2016 in San Miguel Escobar, Guatemala. There, she displayed the step-by-step process of producing coffee — everything from planting a seed, to grinding the beans, to drinking a cup of coffee. López is one of the first women to join the cooperative. Old farmers took time to teach her and the group of women about the process of farming coffee.

“For women, it was very difficult to learn how to grow and especially process coffee. I wanted to learn, though, because I would be able to earn more money and better provide for my children,” López said.



She notes that growing coffee is not simple. The zealous coffee farmer wakes up before dawn during harvest season and will only find a moment's rest before going to bed in the late evening.

"Don't get disheartened if you are struggling. You won't learn it overnight. It takes time, and you will get it... You can do it," López said.

López exported 700 pounds of coffee in her first year of exportation in 2010. This exceeds the average of 150 pounds of output by a typical first-year farmer. Her goal in 2016 is to produce 3,500 pounds of coffee. The fair trade market and her hard work ethic have positively affected her family and surrounding community. López has made large strides in being able to provide her children with an education and her family with a home by acquiring more and more land to farm coffee. She does this with an ambitious attitude as she balances the long harvest season on the plantation and the challenges of motherhood.

"If you continue to think small," López said, "only small things will happen."

Here in St. Louis, Rachael Burchett of SILO Coffee + Goods, has taken initiatives to highlight the economic opportunities provided for coffee farmers across five countries in Latin America. Burchett started out as a young entrepreneur at the age of 16, creating Water for Pana-

ma, now Solea Water. In order to generate more revenue, she used the "triple bottom line framework," which is a tactic that asserts that business should be good for the planet and beneficial to the producers of, in her case, coffee. She used this framework and created SILO Coffee + Goods. Burchett created the idea to give back to the same places that her water project aids by supporting the economic structure in these impoverished areas.

"It's really powerful to see people have dignified employment," she said. "We're all about giving a hand up not a hand out."

Her entire goal is to support communities in an economic sense as well as provide basic needs through her water project.

Though paying more may steer many from buying a fair trade pound of coffee, it makes a difference in the life of these farmers. What might be a more costly cup of coffee could mean an education for a child and shelter for a family. In López's case, it meant for both.

*"For women, it was very difficult to learn how to grow and especially process coffee. I wanted to learn, though, because I would be able to earn more money and better provide for my children."*

For more information on how to contribute to the efforts of the De la Gente mission, visit [dlgcoffee.org](http://dlgcoffee.org). To learn more about SILO Coffee + Goods, visit [silogoods.com](http://silogoods.com).







# *Reevaluating Sweatshop Labor*





Erika Lund  
Freshman  
International Business

Despite the best of intentions, closing down sweatshops could lead to more harm than good among poverty-stricken citizens of developing countries. In fact, eliminating sweatshops could lead to mass unemployment and even more poverty. Instead, the governments of developing countries should improve their systems of education if they want to effectively combat child labor.

In 2010, Apple fell under significant criticism after 14 employees in a Chinese sweatshop jumped out of factory windows to commit suicide due to deplorable working conditions. To solve the problem, Apple placed nets outside the windows to catch any future jumpers. This act of “putting a bandaid on a bullet hole” angered many people. The mishandling of such a devastating situation led to mass boycotts of Apple products and a push to eliminate sweatshops worldwide. However, shutting down sweatshops is not a viable solution to the problems of subhuman working conditions and child labor.

The mention of sweatshops typically invokes a negative image in a person’s mind. From the most simple, ethical perspective, closing them down seems like the moral and just thing to do. Workers are paid very low wages to work in factories where they are often physically and mentally abused. To social activists, boycotting and pushing for the end of sweatshop labor would help these people get the fair treatment they deserve. In reality, shutting down sweatshops could most likely lead to negative repercussions for sweatshop workers.

Unfortunately, sweatshops may be the best option for workers in developing countries. For example, in Honduras, if one works 40 hours per week in a sweatshop, one could make four times the national average wage for a worker in their country. While many Americans may find it difficult to grasp the idea that there could be jobs that are worse than working in a sweatshop, workers voluntarily choose to work in sweatshops because it is more promising and fiscally supportive than other opportunities. Closing down sweatshops would force the employees to seek jobs elsewhere.

This is especially an issue when it comes to children. The United Nations Children’s Fund (UNICEF) found that in the early 1990s, efforts to reduce child labor in Bangladesh ultimately led to children looking for income through gang violence and prostitution. If they had been able to keep their sweatshop jobs with a steady income, they would not have been forced to work on the streets. Clearly, even programs with the best intentions can backfire.

Government officials in India are trying to revise the country’s legislation on child labor. Currently, the law bans chil-

dren under 14 from working in 18 hazardous occupations, such as mining, gem cutting and cement manufacturing. The new law that has been proposed would outlaw child labor below 14 in all sectors. The amendments would also double jail time for employing children to a maximum of two years and increase the fine from 20,000 rupees to 50,000 rupees. This would put these children out of work and would devastate poor families who depend on their children for supplemental income. Trying to reduce child labor would only worsen the issue of poverty in developing countries.

“Sweatshops are only a symptom of poverty, not a cause, and banning them closes off one route out of poverty,” Nicholas Kristof, journalist at the New York Times wrote.

The true route out of poverty is the ability to maintain a job as opposed to experiencing unemployment; the only way to sustain a steady income in many developing countries is to work at a sweatshop. Mamoun Benmamoun, a professor of International Business at Saint Louis University with a Ph.D. in Policy Analysis, had a first-hand look at how sweatshops can impact developing countries while growing up in Morocco.

“Obviously we face a dilemma: whether governments should endorse sweatshops as a provider of employment, or should they prohibit them, thereby possibly ending up with growing numbers of people out of work,” Benmamoun said.

Ultimately, he believes that closing down sweatshops would be detrimental overall.

“Extreme measures to curb their exploitative labor practices could generate widespread unemployment in many poor countries,” Benmamoun said.

Shutting down sweatshops is not the solution. Other means could be taken that would be more effective. For example, businesses must take responsibility to fix the problem at the root by improving safety and increasing wages for their employees. This would be far more effective than American consumers refusing to purchase Apple iPhones or Nike sneakers. Big businesses should sacrifice some profit in exchange for human rights.

Governments of our neighboring countries need to encourage children to attend school and obtain an education to escape poverty. Developing countries should work to offer free schooling for children or free lunches for students to encourage attendance. Education is the key to ending child labor, and governments ought to implement legislation that improves the nation’s infrastructure and access to education. This would incentivize going to school rather than working in a sweatshop and ultimately would be a far better solution to combatting child labor in sweatshops.

**“Sweatshops are only a  
symptom of poverty,  
not a cause, and banning  
them closes off one route  
out of poverty.”**





# The Invisible Scar



Johanna Reedy  
*Senior  
Public Health*

"You can't take a 19-year-old brain and subject it to the constant threat of death or injury by rocketfire and expect it not to be affected," Roy R., a Vietnam war veteran who struggled with post-traumatic stress disorder (PTSD) for 30 years, said. PTSD is a disorder that plagues not only our military but also our civilian population in ways that are beyond our comprehension. It is a mental health disorder that develops after being a part of or witnessing a traumatic event. These events range from military combat and natural disasters to sexual assault and motor vehicle accidents but involve PTSD symptoms that manifest themselves in a myriad of ways. The permanent effects of PTSD envelop every aspect of their lives, including but not limited to their professional, home and social lives.

According to the PTSD Foundation of America, one in three returning troops is diagnosed with symptoms of PTSD, and only 40 percent of those diagnosed will seek mental health help. The separation between diagnosis and treatment is destructive to the lives of these veterans.

Dr. Jeffrey Scherrer, an Associate Professor in the Department of Family and Community Medicine at SLU, spoke of the financial and personal barriers to mental health resources not only within

military culture but also for veterans within our civilian population. These obstacles include financial cost, accessibility, loss of benefits and stigmatization. Scherrer stresses that if veterans are far away from Department of Veterans Affairs (VA) clinics and are unable to afford private health care treatment, they are unable to receive the support and care that they need in order to reintegrate into civilian life.

"You go to an educational session and that's your first 'visit,' but only 50 percent on a good day get beyond that to their first session of treatment. And then the drop out rates are still high after that so it's not just seeking treatment, it's staying in it until it works," Scherrer said.

According to a study by George Washington University, health care for veterans with PTSD can cost 3.5 times as much as health care for veterans without this disorder. If these patients do not feel that they need this treatment or that it is not working fast enough, they will drop out. All in all, most do not seek the treatment that they need until it is detrimental to their life.

Stigma surrounding mental illness within military culture and our civilian population is one of the most significant reasons that veterans do not seek professional help. Within military professions, Dr. Scherrer explained that mental health complaints can impact a military professional's career security and mobility. According to the National Alliance on Mental Health, undisclosed mental illness issues may result in duty limitations from one's commanding officer or even separation from the military altogether. Additionally, disclosed health information may still be reported to the commanding officer if



the care provider believes that the individual could pose a threat in a military environment.

Scherrer stated that there has been evidence that those who respond successfully to treatment lose their benefits from the VA, leading to a possible disincentive to recover. Apart from professional concerns, many veterans believe that admitting to the disease and seeking help is a sign of weakness.

Social environment often does not support or legitimize veterans and their recovery. In 2014, radio host Michael Savage asserted his controversial opinion on this debilitating disease.

"I am so sick and tired of everyone with their complaints about PTSD and depression. Everyone wants their hand held, and a check -- a government check...I can't take the celebration of weakness and depression. To me [suicide is] an act of cowardliness."

He went as far as to say that our military weakness is the reason that ISIS is able to defeat us. Our military world and civilian population is filled with reminders of our military personnels' stoicity without regard to the permanent damage that their careers have left upon them.

Reduction in stigma and increased awareness of these issues is the first step to combating these barriers. Since the use of questionable therapies comparable to torture methods 100 years ago, we have made remarkable strides in the mental health field. Today, our modern therapies are safe, dignified methods to make mental illness more manageable in everyday life. We have made incredible progress in not only our treatment of mental illness, but also our perspective on it. How can we further our awareness and acceptance of PTSD and other mental illnesses? Treat them like we would any other chronic illness.

"I think there is a lot we could do if we had national campaigns that were supported to the degree that we've [supported] cancer awareness and with smoking and other public health issues," Scherrer said.

In our fight to close the gap between diagnosis and treatment, we must come together to change the reputation that mental illness--and PTSD, specifically--has had for decades in our society.

For more information, please visit <http://www.ptsd.va.gov>.

**One** in three returning soldiers are diagnosed with **PTSD**.

**LESS THAN 40%  
WILL SEEK HELP.**





# Religious In *SLU*visity: More Faiths Than One



Fiona Clair  
*Sophomore  
Communication and  
International Studies*

Hidden in the depths of the basement floor of the Busch Student Center lies a peculiar little room that often goes unnoticed: The Interfaith Space. The room is small, but it is filled with a diverse collection of items for prayer and religious practice. Interfaith simply refers to a relationship between faith traditions, so the space seeks to create harmony between different religious groups on campus. It is a soothing place, a perfect little utopia of faith.

In an ideal world, Saint Louis University's campus would not need a designated multi-faith space but would function as a

place where people of different religious backgrounds could worship openly. Beliefs and faith traditions would live and practice harmoniously together without the painful reality of discrimination, judgment and exclusion. However, in reality, wars are fought, exclusionary laws are made, hate is spread and social divides are drawn on the basis of religious identity.

SLU has recently been in the news for hosting speaker Allen West on campus in September of the Fall 2016 semester. West is a former army Colonel and former member of the House of Representatives who currently works as an American political commentator. College Republicans, a student-run organization at SLU, brought West to SLU to speak about Foreign Policy. This event was brought to light after he made what many SLU students considered hateful and threatening remarks towards the Muslim Student Association. In such a world, the following task is daunting: How does a school with a deep-rooted Catholic affiliation, like SLU, create an inclusive environment for all religious practices?

First, it is necessary to understand the resources and outlets available for Catholic members of the SLU community. On average, over 800 people attend St. Francis Xavier College Church for the 9 p.m. student-run mass on Sundays, and every residence hall offers mass on different days of the week. Campus Ministry is a well-staffed department on campus housed in Wuller Hall, and every residence hall offers mass on different days of the week. Campus Ministry is a well-staffed department on campus housed in Wuller Hall, which is open every day to provide a space for prayer, discussion and community. Campus Ministry offers numerous retreats and immersion experiences to help deepen students' faith. In addition, individual campus ministers are responsible for hosting events on topics about which they are passionate.

There is no lack of resources available to Catholics at SLU, but what does the university offer to non-Catholic students? Robby Francis is a resident campus minister at SLU whose job includes spreading the university's mission and being available to students for conversations about life, decision making and faith, regardless of religious background.

"I know that not everyone on campus is going to identify as Catholic -- or even Christian -- but we are all



*The Interfaith Space at the BSC*



called to be the best versions of ourselves,” Francis said.

Francis’ job is to help students become the best versions of themselves. Campus Ministry is called to help every student make SLU feel like home, their religious identity notwithstanding.

The Jesuit mission is deeply ingrained in the idea of serving humanity and recognizing the dignity of the human person. However, this does not just mean serving and respecting Catholics. Campus Ministry plays an important role in creating an inclusive environment in which any student can comfortably practice their faith. For non-Catholic Christians at SLU, affiliate ministers run programs and churches that welcome SLU students, and are easily accessed through SLU’s website. Bar Church, for example, is one of four sites that make up The Gathering Methodist Church in St. Louis, and it is advertised on SLU’s campus. Bar Church takes place every Sunday night at Humphrey’s Bar just off campus, and it offers a new generation of Christians a space to deepen their faith through worship. There are also numerous Christian Life Communities (CLCs) within Campus Ministry that bring students of Christian faiths together.

For those who do not identify as Christian, there are a number of student-run organizations, such as the Muslim Student Alliance (MSA), that provide students with different religious identities with a community of people who share their beliefs. Francis also shared that even if Campus Ministers do not know about specific resources or outlets available, they are sure to know someone who does. He views religious inclusivity as a priority at SLU.

“Rather than seeing ourselves as separate it is more beneficial to see what we have in common,” Francis said. From the outside there seem to be an abundance of resources for all religious identities at SLU, but what do the students think?

Maariya Ahmed is a current SLU student who has served on the Executive Board for MSA since her freshman year. She believes that her religious identity plays a significant role in her everyday life.

“My religion aids me in making my daily decisions, whether that be in deciding what is morally correct, how to behave and react to things, or simply to plan out my day. The person that I am and the choices I make are solely due to my religious beliefs. My identity encompasses my religion,” Ahmed said.

Many students like Ahmed have a religious identity that plays a critical role in daily life, and it is essential that SLU provides the resources and outlets for students to practice all faiths represented on campus. Ahmed believes that SLU does indeed provide these outlets. She highlighted the Interfaith Space in the Busch Student Center and the mosque/masjid next to campus. She also commented on the inclusive design plans of Spring Hall, the newest residence hall that opened in Fall 2016. The building includes Wudu stations in the first floor bathrooms. Wudu is a practice that includes cleansing and washing parts of the body to prepare for prayer in the Muslim faith tradition.

Even in light of the Allen West event on campus, Ahmed says she has never felt uncomfortable or excluded on campus based on her religious identity. She believes her opinions to be represen-

tative of the majority of MSA, who simply strive to live respectfully alongside the campus community and society alike.

“Even with these allegations being made about MSA, the endless support we have received from [the] administration, student organizations and students is overwhelming and honoring. The many minds and hearts of SLU brothers and sisters are compassionate and have gone above and beyond in ensuring that we aren’t left to feel unwanted,” Ahmed said.

According to Francis, this event illustrates SLU students’ views on the issue of religious inclusivity. Multiple student organizations banded together with MSA to create a peaceful protest and fundraiser called “Cupcakes Against Hate” where students sold cupcakes outside of where West was speaking to raise money for the Immigrant and Refugee Women’s Program of St. Louis. The protest also aimed to raise awareness of different faith traditions in response to what they considered to be West’s crude and hateful rhetoric toward students of the Islamic faith and the greater SLU community. The sale of baked goods was an ironic spin on West’s depiction of SLU students as “little cupcakes [who] ask for a ‘safe space’ where they don’t have to hear opposing views.” Regardless

of individual students’ opinions on West and his comments, this immediate and united response to violations of campus community standards stands as an example of the importance SLU students place on the school’s Oath of Inclusion.

Both Ahmed and Francis agreed that SLU provides a number of resources for all faiths; however, they only represent a small portion of the SLU population. SLU can become more inclusive on an institutional level by encouraging the campus community to think and learn about different faith traditions outside of the designated awareness weeks and by providing teachers with calendars of religious holidays so they can plan major assignments around them. They can also offer more spaces on campus for minority religious practices.

On a smaller scale, students looking to become more open-minded on the subject of religious inclusivity can participate in events hosted by the student organization Interfaith Alliance; conversations sponsored by Interfaith Alliance are designed to push students out of their comfort zones concerning the topic of religion. On the most basic level, students can become more inclusive by simply being open to peaceful discussions about different faith traditions.

Being men and women for and with others—as SLU’s mission states— means more than participating in community service. It means more than attending theology classes and discussing social issues with peers. It means more than designating yourself a “social activist.” Being men and women for and with others means having a deep respect for the people in the community and beyond who come from diverse religious backgrounds. It means having the difficult conversations that open minds to topics with which you are not comfortable. It means being an inclusive global and local citizen, aware of the hate and exclusion in the world, and in spite of it all, still keeping hope for a greater “interfaith environment.”





# Scared to Seek Help:

## Making recovery possible



Kristen Delaune  
*Junior*  
*Communication and*  
*International Studies*

I debated writing this article for a while. I wondered how to address a topic that is so personal yet so controversial—a topic that is so heavily stigmatized that I even refrained from telling my best friend in fear that she would view me differently. How could I ever be so vulnerable about something that is so socially unacceptable? Ironically, though, I realized that not writing this article would mean allowing an unjustified stigma to fester and control my recovery and the potential recoveries of all those battling what I have been fighting for the past seven years: an eating disorder. So, I write to share my experience in hopes of offering encouragement and direction while also fighting to lift the stigma of eating disorders and create acceptance for those struggling.

I was a smiling, joyous girl. I said hello to almost everyone I encountered while walking down West Pine. I was full of spirit and love, always ready to make someone laugh. However, underneath, I was combatting obsessive thoughts and a dramatic weight loss. I kept my struggle a secret from everyone. Now, after leaving treatment two years ago, I still debated whether to keep this a secret because of the debilitating fear of rejection that often accompanies eating disorders. I still hesitate to fully admit to being “that girl” who once was smiling on the outside yet secretly falling apart on the inside.

Some of you may know that I was not at SLU the next year, my sophomore year. Some may have thought that I studied abroad or went back home to “figure life out” or decide on a major, but the truth is that I went to the Eating Recovery Center of Dallas, TX, for treatment for anorexia nervosa. I did not tell most of my friends and colleagues about this because of the negative stigma that I feared most. At the start of my recovery, I felt embarrassed, unsupported, and simply abnormal.

Because of the vast judgment of eating disorders, there is an expanding lack of awareness throughout society of this important health threat. To start, eating disorders (EDs) are complex psychological disorders that wreak havoc on a person’s physical, mental, emotional and social well being. They generally involve rumination and ritualistic behaviors with food, an extreme or sudden change of weight, social isolation, loss of the ability to focus, exhaustion, hair loss, organ injury or failure and sometimes even death.

The prevalence of other psychiatric disorders is elevated among those who have EDs as well. According to NEDA (National Eating Disorder Association), nearly 50 percent of persons who have an eating disorder also abuse alcohol and/or drugs, which is five times higher than the general population. There are various types including anorexia, bulimia, binge-eating disorder and ED-NOS (Eating Disorders Not Otherwise Specified). Despite public belief however, these disorders are hardly about the food. The focus on food is actually a cover-up for deeper issues such as past trauma, relationships, insecurities, loneliness and depression.

Unfortunately, the disease is increasing exponentially, so much that 30 million people in the U.S. currently struggle with one. In a college setting, 25 percent of college age women use bingeing and purging as ways to manage weight and 91 percent use dieting according to NEDA. Eating disorders among athletes are also very common today, since many sports emphasize appearance, weight requirements and individual success. Sports have become so overwhelmingly about performance that an individual’s identity becomes so entangled with whether or not they act—and look—the part.

Not only is the prevalence frightening, but the seriousness of the disease is underrated. According to ANAD (National Association of Anorexia Nervosa), anorexia nervosa has the highest fatality rate of any psychiatric disorder. Premature death for women with anorexia between ages 15 and 24 is twelve times higher than the general population. One in five of those deaths is by suicide. Additionally, according to Palo Alto Medical Foundation, one in ten cases of eating disorders leads to death by starvation.

The devastating costs of eating disorders can be prevented though by focusing on the main obstacle to recovery: the stigma. For starters, according to the NEDA, many people believe that eating disorders are a lifestyle choice, that this disease is self-inflicting. I can attest that eating disorders are actually the complete opposite of a choice, and in fact, most people do not even realize they have one until they begin to experience serious health issues.

I did not fully come to terms with my eating disorder until three years down the road. I was convinced that I was simply failing to make the right choices and could not take care of myself. Even close relatives told me repeatedly that I was being selfish for having anorexia and even compared it to my brother choosing to smoke weed: “I just need to make better choices.”

Another stigma of eating disorders is that recovery involves simply changing unhealthy habits, that I and those who suffer “need to just eat.” Of course, eating is essential to providing nutrients to the body so that it can gradually heal from starving. This is vital for life and helps the individual begin to think more



clearly. However, recovery is a journey that looks different for everyone. I left the treatment center on May 16, 2015, and would say that I am still in recovery and may be for another five plus years. Recovery requires a huge dedication of time and effort. I choose recovery everyday; I go to therapy and nutrition appointments, learn about who I am outside of the eating disorder and, most challenging, I confidently share who I am with others.

An additional stigma is that eating disorders only affect women. In reality, this disorder affects all genders alike. According to NEDA, various studies in 2014 suggest that the mortality risks for men with eating disorders are higher than women. Another false presumption is that the presence of an eating disorder should be evident by a person's physical appearance. This is by no means accurate; most people who struggle actually look completely "normal" with no signs of great weight loss or gain, purging or restriction. They are intelligent, loving persons just like you and I. I can remember my mom commenting on how normal I was: "I just don't understand. You are so smart and have so much going for you." I knew these things, yet I didn't know how to fight this disease. These are just a few of the prevalent stigmas that society holds about eating disorders, but the list is expansive and everyone's experience of stigmatization is different.

I can personally attest that these stigmas are very real for everyone who struggles, and they seriously impact a person's recovery. They made me feel like a failure, as if I needed to just "figure it out on my own." And so I tried: I "sucked it up" and dealt with it alone for five years, battling the painful thoughts while barely maintaining a dangerously low weight. I did not go to treatment until I ran out of options, and my health was plummeting fast. Unfortunately, the delay in seeking help is not unique to my story. All of my friends--strangers I have met at SLU, bloggers online, etc.--have had similar thoughts. They think that they can do it alone, that "it's not that big of a deal," and that they cannot put their life on hold for treatment. These thoughts and feelings have kept people from seeking help.

Statistics indicate that only 22 percent of those who have eating disorders actually seek professional treatment. For those who do seek help, it can take approximately eight to ten years to do so. Even more so, the cost of treatment--an average of \$1,000 per day--is impossible for many to afford, and most insurance does not help. Thus, for me and the majority of those who fight against eating disorders, the stigma becomes a barrier to treatment and a barrier to life.

We are at a crossroads between a path of ambivalence--fear and isolation--and a new path of inclusion--vulnerability and social change. I challenge the SLU student body to be bold and embark the latter path with dreams to more fully live out the Oath of Inclusion and be for and, most importantly, with others. My peers at SLU do an excellent job making others feel at home and welcomed, and yet to be straightforward, unintentionally overlook openly discussing, recognizing and offering community for all mental health causes, especially eating disorders. Most of society, including me, habitually shies away from vulnerability, yet I know the hearts of SLU students and their true desire to better the world.

To create a more open culture surrounding eating disorders and mental health issues, we can host speakers, create open forums, fundraise and advertise ways to seek help. Individually, we can start to be a little more vulnerable and share our weaknesses at appropriate times to allow everyone to realize that they are not alone. For those who know someone personally who struggles, try your best to understand and direct them to professional help; it is

not your responsibility to heal them, so try to be gentle with yourself in the process. For those who struggle, know that you are not alone and that recovery is possible with the help of others. I realize that this is an uphill battle and requires living in the uncomfortable, but, as someone who fully understands and sees the benefit of being vulnerable, I encourage you all to join me in fighting this stigma.

If you think you or someone else may be struggling with an eating disorder, you can visit <http://www.mybodyscreening.org/> for

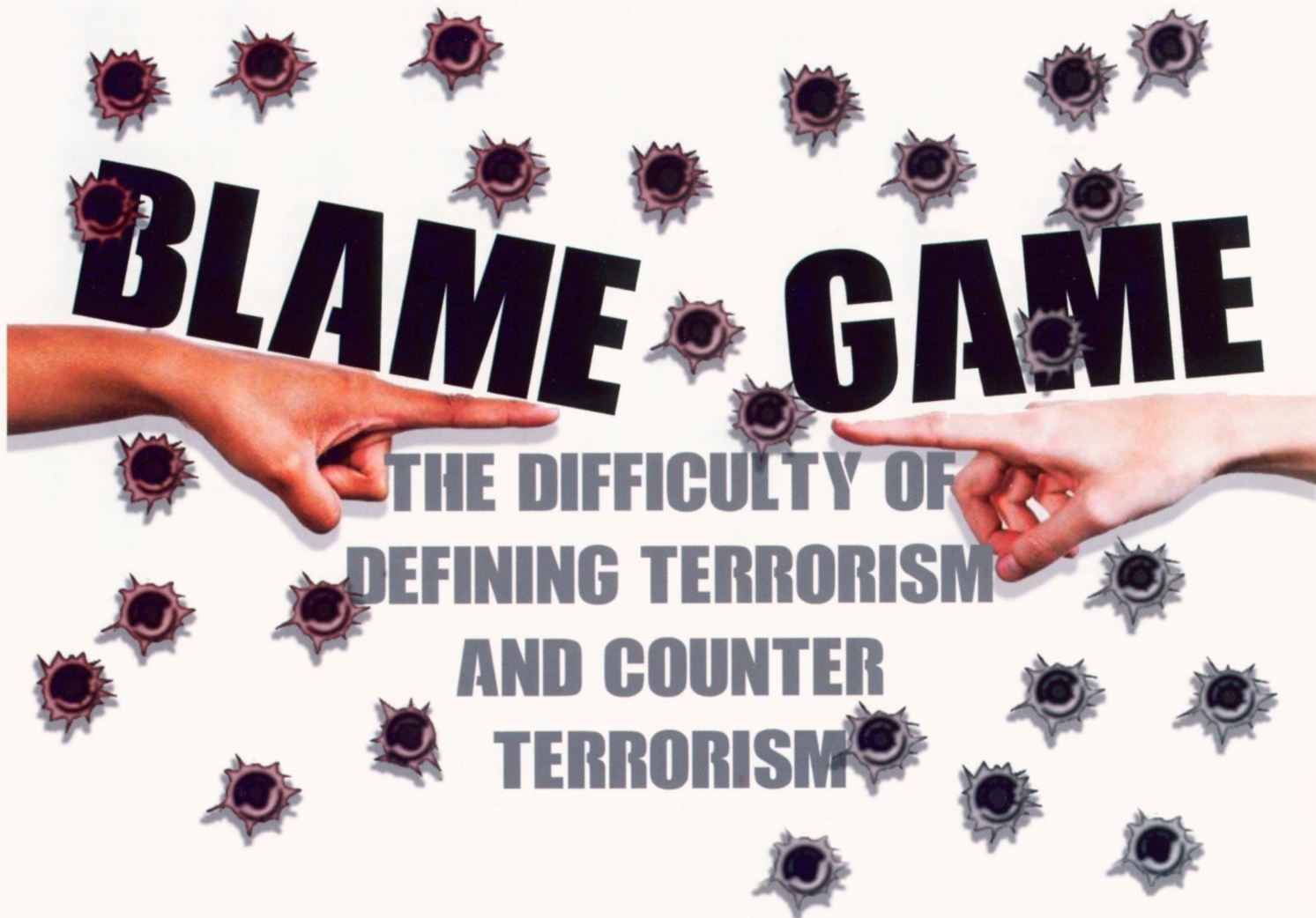
an online screening or call NEDA's helpline at 1-800-931-2237.

Find more information about eating disorders, visit <http://www.nationaleatingdisorders.org>.



*"I am unbelievably grateful for being able to take a year off of college to go to treatment for my eating disorder. It has not only provided me the encouragement and hope for recovery but has also taught me that I do not have to fight this alone. Now, I can say that I feel the most alive and whole in my entire life, connected to both myself and others in ways that bring authentic joy, acceptance, and love."*





Henry Gunther  
*Junior*  
*Public Health*  
*and Philosophy*

When you read the words “counter-terrorism,” what comes to mind?

Likely, one will think of an event such as the morning of May 2, 2011, which marked the death of the terrorist mastermind Osama Bin Laden. In one strategic counter-terrorist strike, the U.S. Navy SEALs successfully cut off the head of the largest organization threatening American security and put at ease the worried minds of Americans across the country.

However, others might think of September 24, 2016, when progress was made against a different form of terror. In a strategic strike, the resistance fighters of the Islamic State shot down a United States Drone, one of the agents of destruction in an ongoing campaign that is responsible for horrific civilian casualties in the Middle East.

That comparison was intentionally controversial and exaggerated. Clearly, the first example was counter-terrorism and the second example was terrorism, right? We in the United States

believe in a moral hierarchy that gives us the ability to label such actions. This implied higher morality leads to a distinction between terrorism and counter-terrorism that justifies violence on behalf of counter-terrorism and demonizes violence that is labelled as terrorism. However, these two very powerful labels may not be as clearly defined as we presume and the consequences of the vagueness are immense.

It is no controversial statement to claim that terrorism is bad. How bad? According to the United States Bureau of Counter-terrorism and Countering Violent Extremism, in 2015 alone, over 28,000 people were killed in over 11,000 terrorist attacks worldwide. However, these attacks were not equally distributed across the world. 74 percent of these victims were killed in just 5 countries: Iraq, Afghanistan, Nigeria, Syria and Pakistan.

In light of these statistics, it is important to note what constitutes terrorism. The term is greatly debated and often can encompass more than what the common political connotation of the term includes. Therefore, determining who is the terrorist and who is the counter terrorist is no simple task.

The FBI defines terrorism as having two main characteristics. First, it must involve violent acts or acts dangerous to human



life that violate federal or state law. Second, it must appear to be intended to intimidate or coerce a civilian population, to influence the policy of a government by intimidation or coercion or to affect the conduct of a government by mass destruction, assassination or kidnapping.

The Patriot Act also defines terrorism in a similar way. While these definitions seem quite straightforward, the examination of a counter-terrorist campaign complicates and challenges the definition. One such example is the American Drone Program.

According to the Bureau of Investigative Journalism, between 2004 and 2015, drone strikes in Pakistan alone killed an estimated 3,341 people, including 190 children and 534 civilians.

campaigns. These strategies are articulated in the Department of State and U.S. Agency for International Development's Joint Strategies on Countering Violent Extremism. The two desired end goals or "states" of countering violent extremism are:

1. Violent extremist groups and individuals who would threaten U.S. citizens, our allies, and our interests are unable to attract new recruits or garner support for their operations in specific communities and
2. Governments, multilateral organizations, and communities have the collective capacity to prevent and counter individuals and groups from becoming radicalized to violence."



Of those killed, only 52, or 1.6 percent of the fatalities were high profile targets. All of the other victims were considered by the US to be enemy combatants--which, for lack of evidence, could simply mean they were men of military age. It

seems that the logic of the Drone Program is that as long as a target is hit, the collateral damage is acceptable, no matter the quantity.

The issue becomes quite clear: how can violence, including violence against civilian populations, be considered counter-terrorism when it is in fact these qualities that make up terrorist actions?

Since 9/11 brought terrorism to the forefront of conversations on national security, the United States has been developing "counter-terrorist" and "counter violent extremist" strategies and

## Since 9/11, the United States has been developing "counter-terrorist" and "counter violent extremist" strategies and campaigns.

In short, countering violent extremism boils down to preventing recruitment and preventing radicalization to violence.

How can the United States defend these goals when we are also so quick

to use violence and recruit our allies to help us in these efforts? It seems that there is a great amount of hypocrisy in our definition of counter-terrorism.

Clearly, a higher moral claim cannot be coupled with egregious violence. If the United States is to argue that we are the counter-terrorists, then peace and understanding dialogue must be our only weapon. The label "counter-terrorism" must only define actions that undo the terror of terrorism without using any form of terror itself.



# CUBA EXPLAINED



**Molly Layman**

*Junior*

*Leadership and Change Management*

For more than 50 years, hostility and skepticism defined the relationship of two countries that sit just 90 miles apart. Now, the stand-off is beginning to end. On Dec. 17, 2015 President Obama announced a new course in relations between the United States (U.S.) and Cuba. But what exactly does this all mean? As we begin the process of normalizing relations with Cuba, it is important to consider not only the benefits that the deal will have on U.S. citizens, but the political and economic implications on their country.

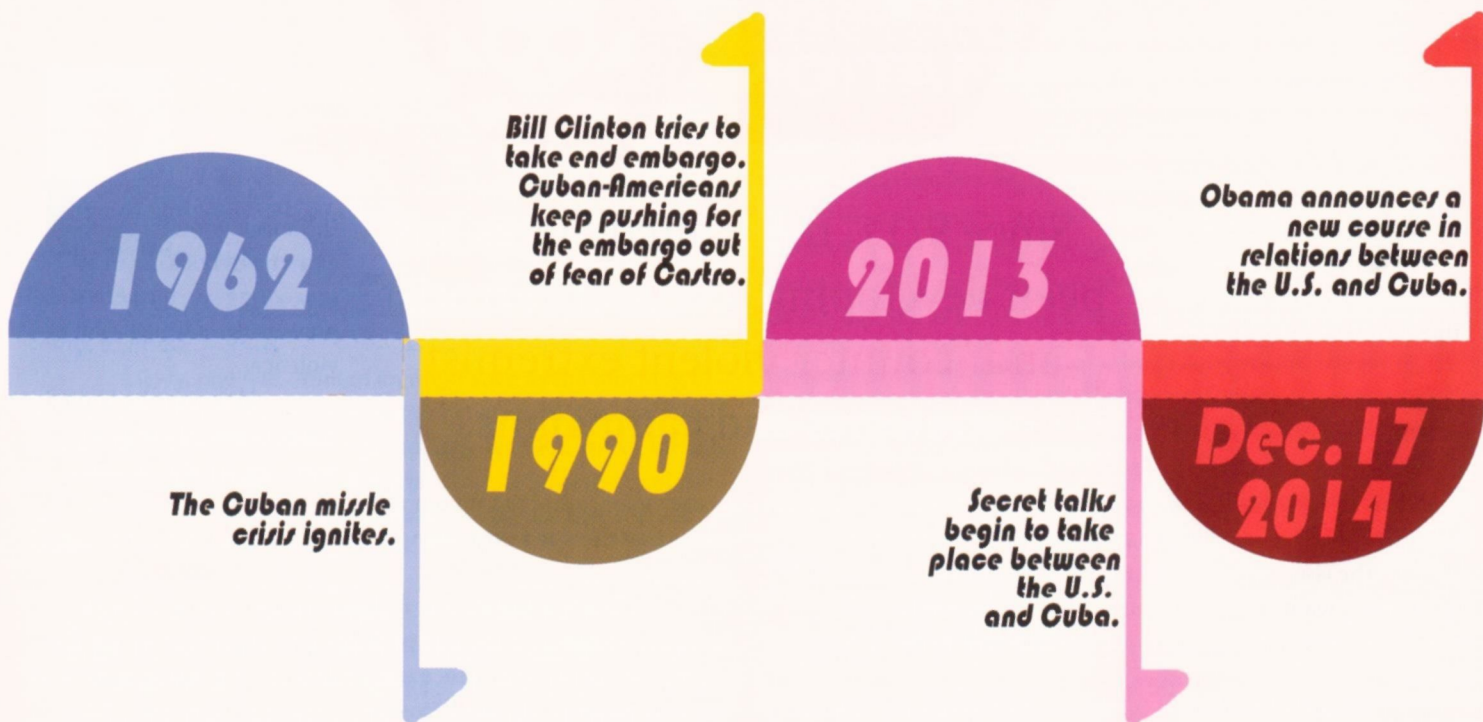
The "Sparknotes" explanation of the relations between the U.S. and Cuba originates from the tensions during the Cold War. When communist dictator Fidel Castro took power in 1959, Cuba became an ally of the Soviet Union (USSR). The U.S. did not want a Soviet military proxy 90 miles away, so they made multiple attempts to overturn Castro's revolution. Although fear of Communism in the U.S. was a major contributor to tensions, there are other less understood forces that date back to before the USSR even existed.

The deep roots of imperialism drove Castro's anti-Americanism. He saw his revolution as the continued struggle against the attempted U.S. domination of Cuba that dated back to the late 1800's. When the U.S. established the embargo in the early 1960's, the goal was to weaken Cuba's government and cause it to collapse. Castro had just taken power in a 1959, and declared allegiance to the USSR. But even after the Cold War was no longer a threat and the embargo failed to take Castro out of power, the U.S. kept it in place.

Thanks to President Obama, we are charting a new course with Cuba. The origins of Obama's intentions with Cuba can be found in his early debates of the 2008 election. In July of 2007 at a debate among Democratic contenders, they were asked whether or not they would be willing to meet with the leaders of U.S. enemies, including Cuba.

"I would. The notion that somehow not talking to countries is punishment to them- which has been the guiding diplomatic principle of this administration- is ridiculous," Obama said.

On Dec. 17, Raul Castro and President Obama simultaneously announced the normalization of relations. Cubans ran into their streets crying and celebrating; meanwhile, Fidel Castro withheld a comment for six long weeks.





"I do not trust the politics of the United States," Castro finally said.

Cuba sent 52 political prisoners back to the U.S. whom the government had been fighting to release for years, which was a major part of the deal for America. Diplomats from both countries immediately created a schedule of talks, conferences, and executive orders to begin communication efforts. In the following August, Secretary of State John Kerry reopened the U.S. Embassy in Havana after 54 years of cessation.

SLU professor of Global Health and Social Justice, Beth Embry, was teaching a social work course in Cuba at the time.

"The last full day we were there was when they opened the US embassy in Cuba. Everyone said this must be the start of normalized relations. The start? Yes. But did it actually do anything besides allow U.S. citizens to travel? Not exactly," she said.

The reestablishment of the Embassy was much more of a start to a new era rather than a cure to an old one. It has restored diplomatic relations, which allows the two countries to talk about interests such as migration, environmental protection, tourism, and trafficking. But the embargo has not been completely repealed. It would take the support of congress to completely lift the embargo, and with a republican congress I don't foresee that happening," Embry said.

Although the embargo may not be completely lifted, the start of relations has allowed the U.S. to better support the civil society of Cuba, which encourages the free flow of ideas. According to Embry, "Cuban government is working on creating a private sector for the first time. Raul is getting more capitalistic than Fidel would've ever dreamed."

In regards to travel, it is still technically illegal to visit Cuba as a tourist. However, there are 12 permitted categories that allow visitors into Cuba. Some of the most obtainable travel licenses come from family, business, educational, journalistic, research

or religious activities. Flights from Miami to Havana cost less than \$200.

The tourism is good in an economic sense for Cuba. Professor Embry met a woman who gets paid more for hosting and guiding visitors than for being a lawyer.

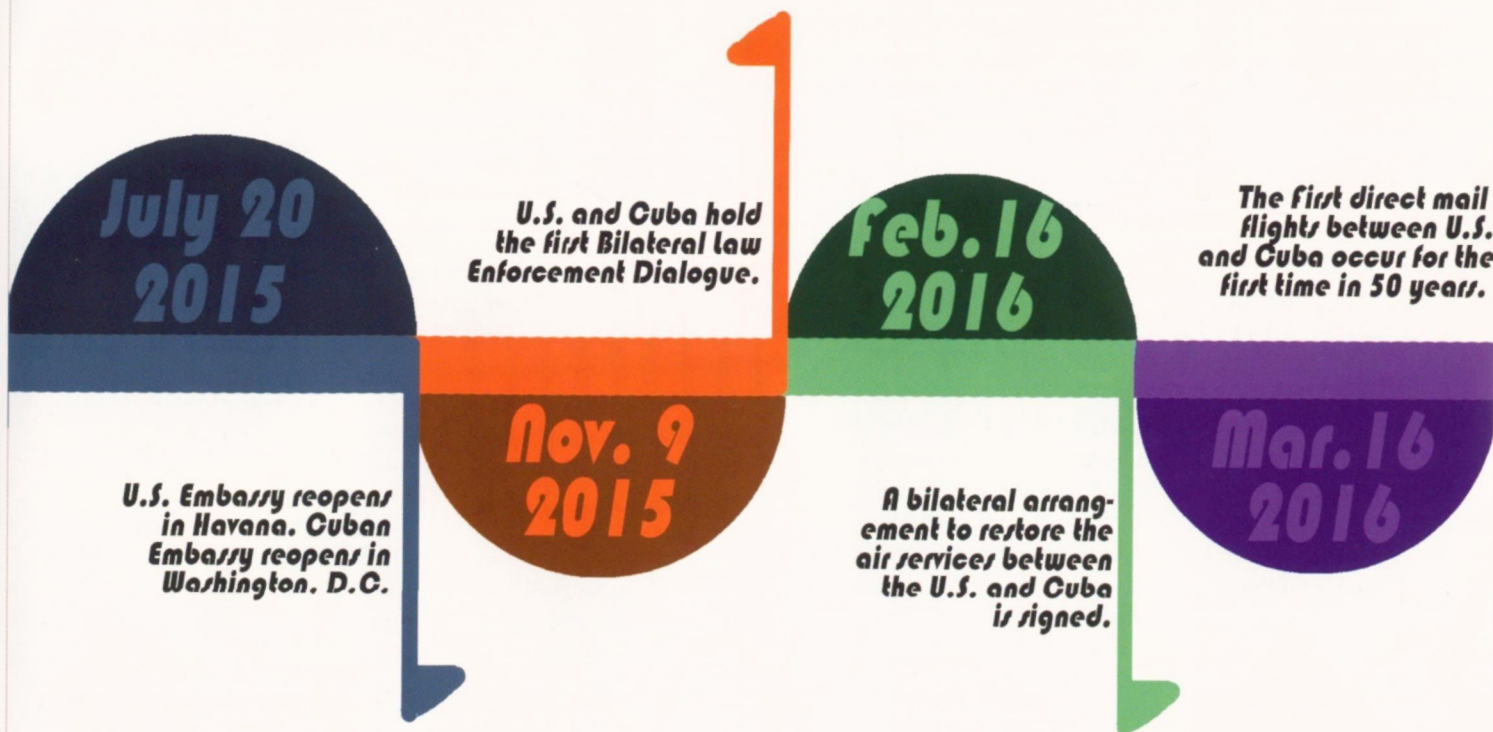
"Overnight, tour guides, transportation, restaurants and hotels jacked up their prices because they knew the demand would be there," Embry said.

However, it is debatable whether or not this new economic demand will be healthy for Cuba. "Everyday there are lines for people to get their government food baskets, there's not consistent water, there's deteriorating buildings and incomplete sewer infrastructure. But now there are more Cubans studying english to cater to a career in tourism because it pays more than a career in medicine or law or social services," Embry said.

This could potentially be harmful; considering that Cuba is still a developing nation, medicine, law and social services are the exact types of industries that need the most development. Now the demand for these jobs are low

It is tough to say whether or not this deal will have strong political implications. The deal is likely to liberalize the Cuban economy, but there is nothing that actually requires Cuba to become less authoritarian, or to be more open to democracy. It could ultimately come down to what Raul Castro, and the ruling class that supports them, are willing to do. Cuba is one of the world's last one-party communist states.

The historic Castro government will have to adjust to international pressures for progress in regards to human rights and personal freedoms. It is facing a slow transitional ending to the hostility with the U.S. that has defined Cuban politics for hundreds of years. What this means for the future of Cuba is certainly a story that does not stop here.





# Down the Street



Ellen Cook  
*Senior  
Communication Sciences  
and Disorders*

Today, much of the news is filled with foreign portraits of refugee populations within camps and countries outside of our own. The stories that circulate focus on the right to entrance--the right to come across the border, with very little news on what happens after refugees arrive. Termed a "sanctuary city," Saint Louis is becoming more and more familiar with the reality of the post arrival and the major challenges that refugee families face in the land of dreams. One major hurdle regards education. Within the umbrella term that encompasses educational hurdles for refugees, we can identify a few of the top challenges for refugee communities right down the street. These include: prior schooling experience, educational priority, language barriers, and discrimination, all of which act as barriers to assimilation.

As one would expect, the prior school experiences of refugees create substantial implications for post resettlement education in the United States. Research by the Department of International Protection indicates a substantial variation across countries, from 80 percent of children attending school in Uganda to 1.4 percent in Malaysia. As a result of such variations, there exists the common possibility that refugee children arriving in the United States have never attended primary school. It is also highly likely that older children have never attended secondary school. For children who have attended previously, schooling disruptions throughout their lives have often lead to educational delays.

Kristen Flores is the coordinator of the Firm Foundations tutoring program located down the street from SLU in South City. Working with a tutoring program specifically for children of

refugee families, Flores is confronted with the educational realities for refugee families on a daily basis.

"What many people do not understand is that the educational hurdles for refugees encompass much more than struggles within the classroom," Flores said.

Flores further explained the arduous road she travels with each refugee student to bring them not only back to grade level, but to a similar standard as their peers. Yet, more often than not, many of the major difficulties lie within the circumstances of resettlement, rather than challenges pertaining to educational delays.

For many families, education is not considered a priority as incoming families struggle with adjustment, locked in survival mode. Education comes second to other urgent needs such as babysitting for other family members or even helping parents with their occupational requirements. In a recent example, an 11 year old student fell behind in school because his mother was pulling him out to supplement the family's income through a custodial position. Such instances pose a major challenge for students who desperately need academic assistance.

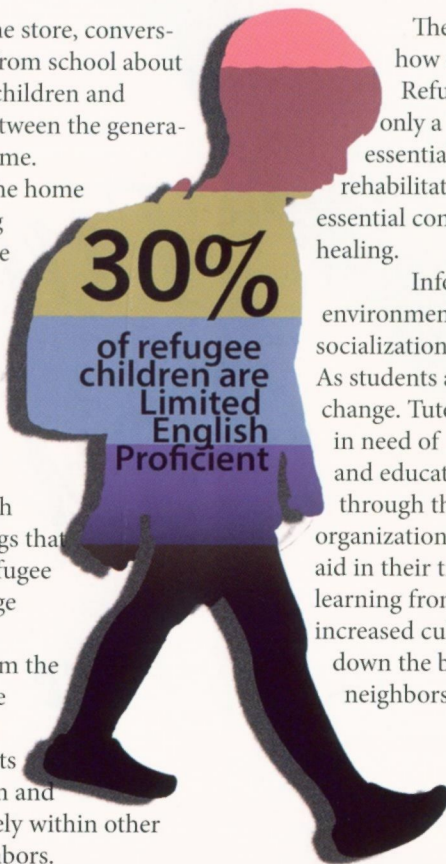
Moreover, such issues are often exacerbated under the language barrier, a major hurdle to resettlement. Language barriers to educational access maintain one of the biggest hurdles, as often the language of instruction acts as a barrier to refugees from accessing the content of education. According to a recent study through the U.S. Department of Education, 30 percent of refugees under the age of 18 residing in the United States are Limited English Proficient (LEP)- defined as not speaking English very well. However, as Flores remarks, these students speak English better than their parents. This translates into additional challenges with educational progress, as parents cannot read the notes that come home pertaining to a child's behavior and performance. Such a reality not only presents difficulties with homework help but also shifts the power dynamic as roles within the family change to meet the demands of families struggling to adjust to their new realities. As Flores reports, it is now the children who are translat-



ing hospital bills and mail, buying groceries at the store, conversing with the electrician and even reading notes from school about their bad behavior. Such role reversals between children and parents create identity confusion and conflict between the generations, often straining relationships within the home.

Yet, it is not only relationships within the home that face challenges but also relationships among teachers and American students in relation to the increasing number of refugee students entering the classroom. Unfortunately, as Flores reports from interacting with the public schools, teachers have not been sufficiently trained to understand the difficulties and experiences of refugee children, often misinterpreting refugee families' culturally "inappropriate" attempts to succeed in their new environments. Often such circumstances lead to cultural misunderstandings that result in prejudice and discrimination against refugee students who are already struggling with language barriers and confusing cultural changes.

In fact, according to recent research from the University of South Florida, discrimination is the greatest barrier to adaptation for immigrant and refugee students. Victims experience lasting effects on self perception, social interactions, motivation and achievement. Such a reality is not happening solely within other countries but right down the street--to our neighbors.



The question remains; despite the challenges, how can we inspire change? The United Nations Refugee Agency writes that education is not only a "fundamental human right but also an essential component of refugee children's rehabilitation." Studies have found that education is an essential component for restoring social and emotional healing.

Informed educators and supportive school environments play a key role in the facilitation of socialization and acculturation of refugee children. As students and advocates, we can be a part of this change. Tutoring programs such as Firm Foundation are in need of educated individuals to serve as mentors and educators. Individuals can also get involved through the International Institute of St. Louis, an organization that works directly with refugee families to aid in their transition process. In turn, working with and learning from refugee students will not only aid in increased cultural understanding, but also work to break down the barriers and stigmas separating us from our neighbors down the street.





# WAR ON DRUGS

## *Time for a Ceasefire*

### *The Legacy of the War on Drugs*



Maddie Baumgart  
*Sophomore  
International Studies  
and Sociology*

To borrow from rapper Jay Z (Shawn Carter), the War on Drugs is an “epic fail.” Since its declaration in 1971, the rates of drug use have remained steady, prices have dropped, overdose deaths have surged to the highest rate in decades and the international trade has boomed. Not only has the War on Drugs failed to curb drug use, but it has also marginalized communities of color to such an extent that some, like author Michelle Alexander, argue that such policy acts as the “new Jim Crow.” Over the last 40 years, the incarcerated population increased 500 percent to a total of 2.2 million people. Nonwhites comprise two-thirds of this number.

Claiming these consequences were unpredicted and accidental seems nonsensical in light of the recent disclosure of former President Nixon’s domestic policy chief John Ehrlichman.

“We knew we couldn’t make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin and then criminalizing both heavily, we could disrupt those communities. We could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did,” Ehrlichman said in a March 2016 interview with Harper’s magazine.

The War on Drugs was not the first instance of drug policy providing a vehicle for villainization. The criminalization of a drug has often corresponded with its association with certain minority populations. When middle-aged, financially stable white

women comprised the main users of opium in the early 1900s, the drug was entirely legal, even touted as “nature’s gift.” When Chinese male immigrants poured into the country to construct the railroad and brought their opium with them, however, the media demonized the drug and pushed for harsh legislation against smoking opium, though the drug’s other forms remained legal for several years.

Marijuana, wholly legal until 1937, followed a similar pattern. When the drug became associated with the Latino community, policymakers incited a moral panic by claiming it sparked senseless violence, even dubbing it “loco weed.” Newspaper features churned tales of young Mexican men high on marijuana shooting white strangers they passed on the street for no apparent reason. Mandatory five-year sentences became common for even first time offenders charged with simple possession.

Nixon’s formal announcement of the War on Drugs in 1971 only served to further fuel the existing battles against the perceived users of drugs: racial minorities. The crack-cocaine disparity is perhaps the clearest indicator of the role of race in drug policy. Despite the fact that crack-cocaine and powder cocaine are the exact same drug in different forms, and the fact that more whites than blacks smoke crack, it became associated with urban black youth. As the myth of the super-predator gripped the nation, fear of crack-cocaine skyrocketed. As a result, the 1986 Anti-Drug Abuse Act set a minimum sentence of five years for possession of five grams of crack and 10 years for 10 grams, whereas 500 grams of powder cocaine triggered only a five-year sentence. Although the Fair Sentencing Act of 2010 reduced the sentencing ratio of 100:1 to 18:1, crack still leads to a longer sentence by an average of three and a half years.

The War on Drugs also selectively chooses its battlefields: the police patrol certain “hotspots” much more heavily. In a



recent lecture hosted by the sociology department, Dr. Jeff Smith, a former Missouri senator who was incarcerated for a year over a campaign infraction and now fights for prison reform, spoke of the disparities in surveilling.

"Put it this way: if the federal government was really so intent on fighting drugs, they'd patrol college campuses over poor neighborhoods of color. But the overwhelmingly white middle-class has banded together to shelter their children from the same repercussions others face when they use drugs. On campus, if you get caught with a bag, maybe you get suspended for a few weeks. In other neighborhoods, that same crime means significant jail time," Smith said.

Such practices, combined with the fact that assets of alleged dealers are seized prior to proving guilt and those without resources must rely on usually inexperienced and overworked public defenders, have marked minority and economically depressed communities as targets of the War on Drugs. As a result, many politicians have turned a blind eye to its devastating effects, advocating for "tough on crime" policies that "keep our communities safe."

That is, until recently. As the recent heroin and prescription opioid abuse epidemics have clawed their way into affluent white suburban neighborhoods, the issue of drug reform has elicited markedly different responses from leading politicians. In a town hall-style meeting in New Hampshire, former Florida governor Jeb Bush spoke of his daughter Noelle's struggle with addiction to prescription pills and, allegedly, crack cocaine. Former Republican candidate Carly Fiorina has delivered impassioned speeches about her experience with "burying a child to addiction." Apologizing for her former stance regarding crime, Secretary Clinton laid out a \$10 billion plan to combat and treat drug addiction over the next decade.

While this newfound compassion for addicts is seemingly beneficial for whites and nonwhites alike, not all agree. Cassandra Frederique is a New York State Director at the Drug Policy Alliance who leads Congressmen and women on tours of safe injection facilities to work to reduce the harms associated with drug use and promote effective drug policy. She has lobbied against each of the heroin bills introduced the last three years that would cut funding for public health efforts and addiction treatment and allocate it towards increased law enforcement. This year, her annual meeting with a Republican Senator who usually championed such a punitive approach went drastically differently.

"He looked at me and said, 'We can't arrest our way out of this problem.' I was shocked. I was like, 'Yes! That's what we've been saying!'" Frederique said.

She went on to seek his support for an increased budget for treatment facilities, housing, education, supervised injection centers and heroin-assisted recovery programs. While advocating for decreasing harsh drug laws, he cut her off.

According to Frederique, he said he had no plans to cease fighting for bills that hold drug suppliers responsible for homicide if a person they sold to overdoses. He wanted to enforce even more punitive laws to keep "those people" away from "our kids."

"That reminded me who was vulnerable in the room. We didn't choose these drug policies; they were imposed on us. And they aren't changing because of the pain they've caused our communities. They're changing because that pain has started to touch

white families. The War on Drugs is a machine and it likes browner meat, but it eventually devours white as well," Frederique said.

A more compassionate view of those addicted to drugs is a double-edged sword: while garnering sympathy for addicts, it only further demonizes even low-level drug dealers, many of whom are users themselves. Many times, dealers are still conceptualized as black or Latino. Maine Gov. Paul LePage provides a perfect example of such a mindset.

"These [drug dealers] aren't the people who take drugs. These are guys with the name D-Money, Smoothie, Shifty — these types of guys. They come from Connecticut and New York, they come up here, they sell their heroin, they go back home. Incidentally, half the time they impregnate a young white girl before they leave, which is a real sad thing because then we have another issue we've got to deal with down the road," LePage said in a recent town hall meeting.

In addition to harsher sentencing for low-level drug suppliers, even the benefits of drug policy reform are distributed unequally. Drug courts are often heralded as effective alternatives to incarceration, a way to ensure offenders receive treatment while serving short "flash sentences." However, once convicted, 62 percent of whites but only 21 percent of blacks and 10 percent of Latinos are tried in drug courts.

Dr. Liz Chiarello, a SLU Sociology professor currently conducting research on the intersection of the criminal justice and medical systems regarding prescription drug abuse, emphasized the role of frontline workers in alleviating or exacerbating this disparity.

"Not everyone gets to go through drug courts. It's only those deemed especially worthy. Who is perceived as a good candidate for drug court? I think that's a racialized question," Chiarello said.

Though funding for treatment centers has increased with the changing political climate, access to the majority of these options remains out of reach for many, especially for those without insurance. For private treatment, mere outpatient detox costs from \$1,000 to \$1,500, while inpatient rehab can range anywhere from \$12,000 to \$60,000 for a 60- or 90-day program. Cheaper, state-sponsored treatment options can often be sub-par.

"In general, we need to see a social and cultural change around addiction. Being addicted is not a crime. It really is a healthcare issue, but it's not treated like such. One of the best things we can do is equalize mental, behavioral, and emotional health and make sure the funding for those is balanced. The most important thing is to expand resources: fund programs and get people to enter the field of addiction treatment," Chiarello said.

Frederique also advocated for new policy but highlighted the importance of that policy's origin.

"We've taken very racially motivated laws and dismantled them when they didn't serve the white agenda. However, just getting rid of the laws isn't enough," Frederique said. "We need to find ways to atone for the legacy of pain they've caused in marginalized communities. Most importantly, we need to ensure that those voices are heard and those narratives are made visible. They are the most crucial part of establishing new policy."

FOR EVERY  
U.S. SPENDS ON  
DRUG ENFORCEMENT (\$500 BILLION)  
ONLY 2 CENTS GOES  
TOWARDS  
PREVENTION  
ADDICTION TREATMENT  
AND RESEARCH







# REFUGEES as **NEIGHBORS**





**Cecile Hermanns**  
*Freshman*  
*Environmental Science*

While the admittance of more refugees has become a contested fact in many developed countries, including both Germany and the United States (U.S.), German citizen Heide Stockhorst welcomes her next-door neighbors.

"[The refugees] are pleasant and cooperative and we knit stockings and make dolls and what have you. And they are very friendly, and...they want to learn. They want to learn German. But not all receive the approval. They are not allowed in the schools as long as they don't have their own home. That is the big problem," Stockhorst said.

A number of alarming events concerning immigrant-European native relations have made headlines in the past year. Among the most violent, Middle Eastern men assaulted hundreds of women during the 2016 New Year celebrations in Cologne. However, Stockhorst has spent the last few years living near a refugee camp of 500 people outside of Hamburg, Germany and has not felt the fear and tension that many Europeans have experienced.

"I haven't experienced any [culture clash]. Not even on the subway, where there was a woman with a burka, where only the eyes show. It was very peaceful in the subway and no one harassed her or did anything," Stockhorst said.

Stockhorst lives in a nation that is deeply divided. The emergence of nationalistic, anti-immigration parties, such as the Alternative for Germany (AFD), raises major concerns for Stockhorst. Despite the rising anti-immigration sentiments on a national scale, Stockhorst asserts that the refugees near her have not been a problem.

"I can say positively that here, even those with headscarves, they will all be accepted in our neighborhood," Stockhorst said.

The U.S. has begun to accept refugees, sending them to cities all over the country, including St. Louis. According to the St. Louis Post-Dispatch, over the course of the past year, 350 refugees have been settled in the St. Louis area. This is less than the camp near Stockhorst, but the resettlement has still caused some backlash.

However, some community members and organizations are actively welcoming refugees. The International Institute is a local non-profit organization that helps resettle refugees who have been granted asylum by the federal government. The director of the International Institute in St. Louis, Anna Crosslin, told Fox 2 News that she hoped the extensive screening process that refugees go through to reach the United States would alleviate fears. Syrian refugees must go through a complex and challenging process, including interviews, back-

ground checks and tests, that lasts 18 to 24 months to enter the United States.

"If they can't clear any one of those 13 hurdles, they don't become part of the group that is admitted to the United States," Crosslin said.

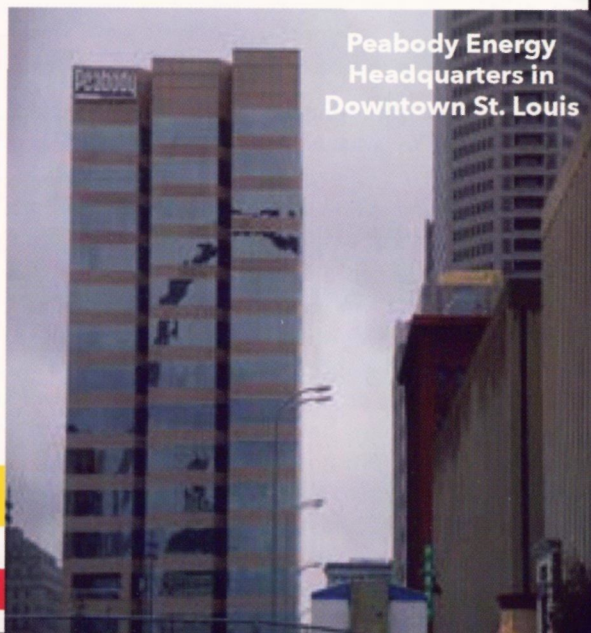
Ross Douthat of the New York Times expounded upon the two major perceived dangers of accepting refugees: the potential influx of terrorism and the long-term difficulty with assimilation. Recently, terror attacks by refugees in Europe, like the violence that occurred in Paris in November 2015, have negatively influenced public perception of refugees. This, along with terrorist attacks unrelated to refugees, has resulted in a widespread fear among American citizens. According to a Brookings article, 83 percent of Americans see a major terrorist attack as imminent.

However, the threat of a terrorist attack is much more likely to occur in Europe rather than in the U.S.

"The first problem, of easy terrorist movement, is worse on the continent not only because of Europe's sheer proximity to the Middle East, but also because of the way the continent's Schengen Area works: If your passport (forged or real) gets you into one Schengen country, then you can enter all the rest (well, or at least until recently you could) without facing any kind of border check at all," Douthat said.

Additionally, in Europe, many asylum seekers arrived prior to being screened for refugee status by means such as crossing the Mediterranean. Every admitted person to the U.S., however, is required to go through the pre-screening Crosslin mentioned. Pre-screening allows the U.S. to choose which refugees are allowed to enter the country, thereby reducing the risk of a terrorist attack stemming from refugees.

In a poll conducted by the Public Religion Research Institute, a slight majority—53 percent—of Americans believed refugees should be admitted to the U.S. after a thorough screening process, and in Germany, certain citizens still remain optimistic about the refugee crisis. When asked if Germany should continue to accept refugees, Stockhorst said, "Yes, I believe that."



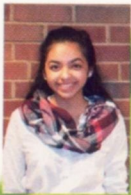


# NAVIGATING

## THE LAND OF

# OPPORTUNITY

## AS THE CHILD OF IMMIGRANTS



**Yesenia Sanchez**

*Sophomore*

*French and International Studies*

As a child, we fear losing our parents, even if it is at the store for five minutes. Yet, what is supposed to be a silly fear is a reality for the children of undocumented immigrants. People leave their countries, their homes and their loved ones in order to come to the United States in search of a better life. As a result of this move, many of us struggle with our identities.

Immigrants leave everything behind and finally reach the "Land of Opportunity" to be met with a disastrous legal system that often takes advantage of them. Becoming a citizen is a long, complicated and expensive process. People confide in lawyers and end up being scammed. Many times, the undocumented person loses their life savings and any hope of becoming a citizen.

Those who manage to obtain citizenship should receive the utmost praise for their resilience. This resilience is common in immigrant communities. We are dealt a hand that includes a problematic immigration and legal system and, to top it off, racism. We are constantly told that we are a burden to this country -- that it would greatly benefit without us. This country is called the Land of Opportunity for a reason. People who have migrated here deserve

to have equal access to the amazing opportunities made available by this country. Anyone who is starting the citizenship process should be congratulated for taking these important first steps, as those who have completed the process are, like my mother.

As the child of undocumented immigrants, I feel a responsibility to make sure my parents' efforts in leaving everything behind were not futile. I feel the need to justify their sacrifices because, without them, I could not be where I am. I have to prove to others that my people are not criminals, but hard workers who deserve to be treated with more respect and dignity rather than hatred and condescension.

I have a bicultural identity that becomes more complex when I think of where I "belong." I am too brown to belong in this country, yet when I speak Spanish, I sound like a pocha, like someone who did not grow up in Mexico. It does not matter that I was born in this country nor that I lived in Mexico for almost four years. I am barely enough in either place. I constantly have to prove to people that I am enough. I have to prove how amazing immigrants and their children make this country.



I feel that those who are not the children of immigrants do not understand our difficult experiences. A simple traffic violation can result in deportation. Medical deportation is also a reality is rarely discussed. Even at a hospital, undocumented immigrants who are likely already in a very vulnerable situation, still must fear being separated from their families and new homes. As a result, immigrants avoid obtaining medical care.

The Pew Research Center said that about seven percent of all children in grades K-12 have at least one undocumented parent. Clearly, separating families is immoral but some still argue that these children are anchor-babies, meaning they could potentially help the undocumented immigrant stay in the country. If an immigrant is facing deportation, having a child is rarely enough to stop the process. It occasionally happens, but it is because the child is handicapped or needs constant care. Sometimes these people argue that children of undocumented immigrants born in the United States are not even citizens. Being called an anchor-baby is degrading. My citizenship is protected by the Constitution and there is not much you can do about it. The family can wait until the documented child is 21, then they can apply, but even then there are immigration policies that force the parent to leave the country for a period of three to ten years. So the proposition that the anchor-baby guarantees a parent's citizenship is in fact a myth.

We need to place more importance on the children of undocumented immigrants. No child should have to grow up without his or her parents, and we must do everything to prevent

separation. A great way to help would be going to local churches to find out if any undocumented immigrants facing deportation have taken refuge there. Advocating for the expansion of Deferred Action for Parents of Americans (DAPA) is what we should be doing as neighbors to the children of undocumented immigrants. DAPA is a program that helps an undocumented parent stay in the country because of a documented child. However, a Texas federal judge issued an injunction which resulted in DAPA currently being blocked by Texas. This came with the support of a number of governors, so this program is halted in the entire country. It is very important that we help DAPA succeed because according to the Department of Homeland Security (DHS), about 4.4 million people would benefit. We can prevent 4.4 million people from having to endure a separation from their family and new home.

Thankfully I did not have to experience a family member being deported. However, separation is a reality for many undocumented immigrants and their families. This is an incredible country and we should welcome the diversity that immigrants bring. We should never belittle their children for living between two cultures.

*Gracias por los sacrificios.*

*No person is illegal*





# Incarcerating Illness:

## Side Effects of Funneling People with Mental Illnesses into the Penal System



Taylor Schleisman  
*Sophomore*  
*Psychology and American Studies*

Mental illness—two words that may summon images of straight jackets and the white padded walls of an asylum. However, according to Public Broadcasting Service (PBS), the reality is that local jails and state and federal prisons now house three times the amount of people with mental illnesses than general and specialty hospitals in the United States. Options for convicts with mental illnesses prioritize punishment over treatment and isolation over integration. The consequences of such inefficient support systems are devastating for inmates, the penal system and all communities involved.

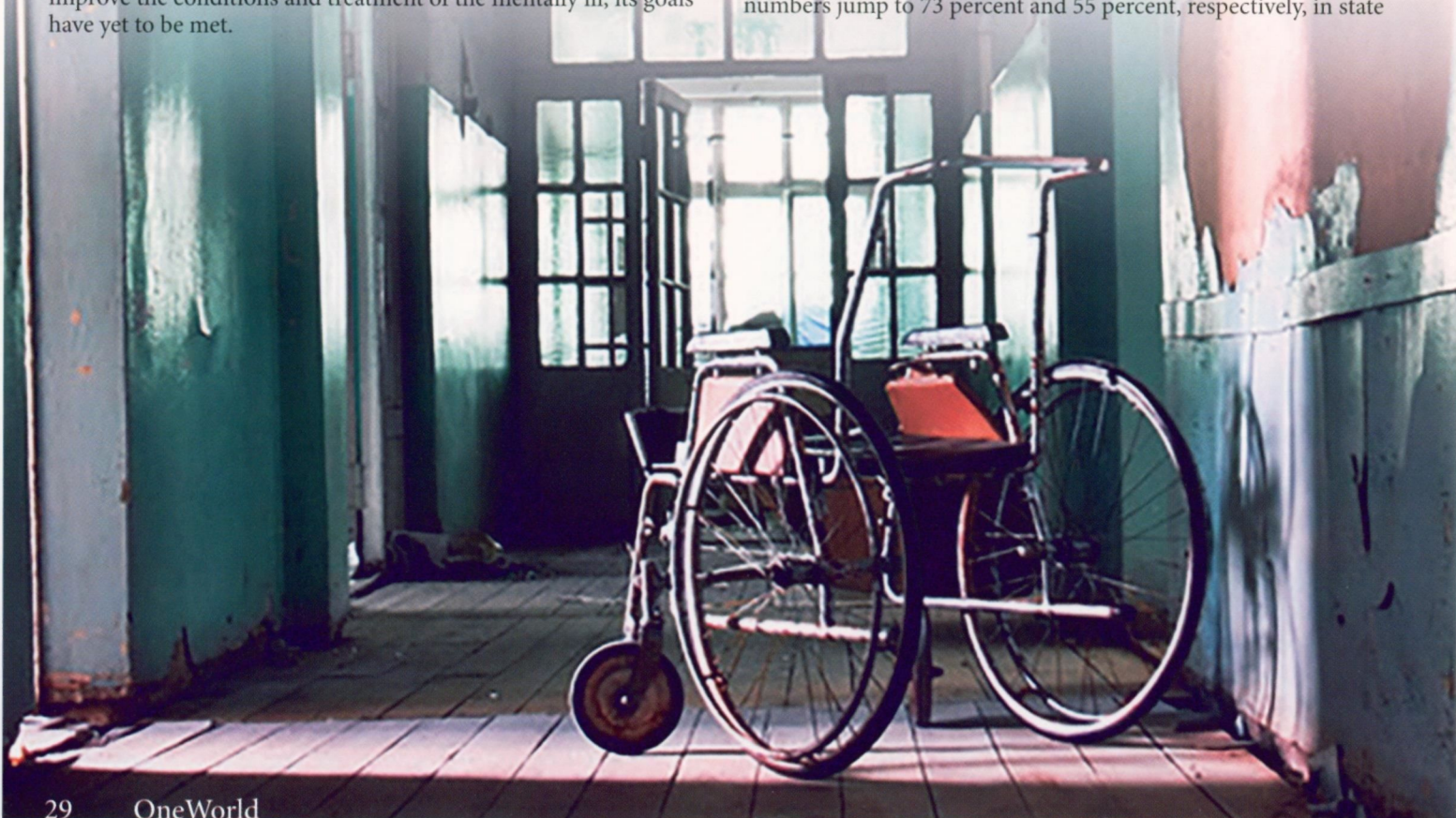
The current circumstances are largely due to the federal defunding of institutionalized care in the 1970s. The Community Mental Health Act burdened under-resourced community organizations and providers with treating people suffering from mental illnesses. While this legislation was well-intentioned and aimed to improve the conditions and treatment of the mentally ill, its goals have yet to be met.

Due to lack of funding and government follow through, restorative justice collaboratives and community outreach groups that the government intended to provide this care were and continue to be underfunded compared to the demand. It is extremely difficult to provide adequate mental health care—even more so without the means necessary to provide treatment, rehabilitation and integration into social and professional life.

One of the many obstacles that prevents those with mental illnesses from integrating into communities is the stigmatization of mental health in American society. While progress has been made, it is still a taboo topic for many. Even those who were able to take advantage of care options within their community or had the means to seek private care often still find themselves involved with the law.

According to PBS, as of 2012, “12 percent of adult psychiatric patients receiving treatment in the San Diego county health system had been incarcerated.” Mental illness clearly does not discriminate by class. Even those with the money, time and support to seek mental health care find that society criminalizes their condition.

Systematic changes over time have created a federal prison population in which 61 percent of female inmates and 44 percent of male inmates have at least one mental illness. These numbers jump to 73 percent and 55 percent, respectively, in state





prisons, according to PBS. The documentary "The New Asylums," argues that the penal system has, as a result of systematic and demographic changes in the mental health care system, become the primary setting for housing and treating people with mental illnesses. The documentary points out that many courts believe those with a mental illness charged with a crime will be better off in the penal system because of the treatment available there, rather than in communities. While asylums were put in place to treat individuals with mental illnesses, general population prisons function to subdue inmates with mental illnesses until they are released.

Tishaura O. Jones, former member of the Missouri state legislature and current Democratic treasurer for the city of Saint Louis, said that the four main obstacles that prevent ex-inmates with mental illness from successfully reintegrating into society are the lack of 1) adequate and affordable housing, 2) employment opportunities due to discrimination, 3) access to health care and mental health care and 4) substance abuse counseling and resources.

"We must make sure that we are fully funding safety net providers for mental health care and substance abuse. [...] We have

## "We have to stop criminalizing substance abuse and train people to appropriately recognize mental health crises and not immediately put them in jail."

Correctional officers are required to receive instruction on handling and recognizing mental illness but may not always do so effectively. When they can no longer subdue an inmate, they have few options within the penal system. They can send the inmate to a prison psychiatric hospital, where they are evaluated, stabilized and returned to the general population within the prison.

The other option is solitary confinement, which often intensifies the symptoms of a mental illness. According to the Huffington Post, the trauma of being imprisoned alone is known to cause hallucinations and delusions. Many latent mental illnesses will manifest due to the stress of prison life, even if they have remained undiagnosed previous to incarceration. In these situations, it is nearly impossible to determine where mental illness ends and criminal intent begins. It is also incredibly difficult to determine whether the responsibility of the penal system should be to punish people for their crimes or rehabilitate them for reintegration.

Prisons were never meant to function as sources for mental health care at the capacity that they are in the U.S. Regardless, the mental health care that many inmates receive while in prison is the best that they have ever had -- if they had ever been treated at all. However, that does not mitigate the increasing financial strain placed on the penal system in covering the costs of caring for people with mental illness. Obtaining medications, equipment and extra staff needed to properly care for these individuals is often a hard fought battle that is hardly ever fully realized. The consequences? Inadequate care and resources for both incarcerated and newly-released inmates.

When individuals with mental illnesses (within the prison system or outside of it) are prescribed medication, it is not uncommon for them to believe that the medicine is, in fact, what is making them feel poorly. In these cases, individuals often stop taking their prescribed medication, which in turn, causes symptoms to surface or worsen. In this situation, what would be considered a minor deviance in a hospital is a cause for punishment in a general population prison. The inmate will most likely be sent to isolation or the prison psych ward to have the dosage or form of medicine recalibrated. If the medication was not already a "mandated" medication, it will most likely become one for that individual, regardless of whether or not mandated medication is, by principle, ethical.

to stop criminalizing substance abuse and train people to appropriately recognize a mental health crisis and not immediately put them in jail," Jones said.

When an individual is released from prison, not only is it extremely difficult to find employment and housing, but also to find health insurance. Without health insurance, funds for a doctor's appointment or an existing prescription, individuals will begin to suffer the symptoms of their illnesses, as well as potential withdrawal symptoms. Often this will lead to trouble with the law or their probation officer, funneling them back to prison.

Although it is established that access to health care decreases an inmate's likelihood of returning to prison, there is still debate as to who should fund it. Under the Affordable Care Act, some states -- most under non-conservative leadership -- have opted to extend Medicaid coverage to ex-inmates. If they are accepted, they will be able to visit primary care doctors and specialists, as well as fill needed prescriptions. However, not all doctors will accept Medicaid, thus limiting the care options of ex-convicts with mental illnesses.

What is most important to realize is that there are ways to alleviate the side effects of funneling people with mental illnesses into the prison system. The government must protect and expand funding for mental health care and substance abuse counseling, especially for safety net health care providers, who help fund essential care for uninsured people. Decriminalizing and destigmatizing mental health and substance abuse-related issues will ensure that people with mental illnesses, current inmates and ex-convicts will be treated instead of incarcerated. Lastly, interest groups at all levels must advocate for justice system reforms that lean toward restorative instead of punitive justice so that punishments match the severity of the crime and not the illness.

To learn more about these topics and more, check out:  
Tishaura O. Jones, Treasurer for the city of Saint Louis  
'By the Numbers: Mental Illness Behind Bars' - Sarah Varney  
'The Nightmare of Prison for Individuals With Mental Illness' - Dustin DeMoss  
The Young Minds Advocacy Group  
'Shut Down the Workhouse' - Tishaura O. Jones  
'The New Asylums' Documentary



# The Silent Outbreak

Individuals infected with the virus  
exhibit no or minimal  
external symptoms.



Royce Dong  
*Freshman*  
*Physics, Pre-Med*

In the summer heat of West Africa, tens of thousands of people suffered the same fate. At first, flu-like symptoms left the impression of a common cold. But in a matter of days, what began as a bad fever quickly gave way to excessive vomiting and diarrhea, eventual bleeding from every orifice imaginable and nearly certain death. The ruthless plague of 2014, Ebola, spread by the blood, sweat and tears of its victims. Although we thought we had seen it all, only two summers later, a different epidemic caught fire; and its presence, though not as striking, has been felt in all corners of the globe. First identified within a namesake African forest in 1947, the Zika virus remained confined to the tropical regions of Asia and Africa. In recent years, however, it has extended to South America and the Pacific and has developed into a widespread epidemic. In February 2016, the World Health Organization declared the virus a Public Health Emergency of International Concern.

What has made Zika so dangerous are its underlying effects on humans. Individuals infected with the virus exhibit no or minimal external symptoms; the worst cases see only fever and rash, making it difficult to identify carriers. Even so, when an infected woman gives birth, the Zika virus can be transmitted to her child, which often causes microcephaly—stunted development of the brain and a smaller than average skull—as well as other very serious brain-related abnormalities.

The main vector for the virus is a daytime species of mosquitoes called *Aedes aegypti*, which is limited to regions of hot and humid climates. This has led to a dangerously rapid spread of Zika throughout equatorial nations such as Brazil and the Philippines. Although men may seem to be largely unaffected by the virus, an investigation carried out by the Maryland Department of Health and Mental Hygiene confirmed the sexual transferral of the virus to a woman who herself had never travelled to infected areas. The Center for Disease Control (CDC) has labeled it to be a sexually transmitted disease. Numerous instances of sexual transmission of the virus have been confirmed throughout the United States,

as well as Argentina, Chile, France, Italy and New Zealand.

As of Sept. 21, the CDC has reported 3,358 cases in mainland United States. Many of them stem from travel-related infections that occurred outside of the country. As for infections occurring within the United States, the vast majority of these cases have taken place in the southernmost tip of Florida, where the climate is most favorable for local dispersion. Luckily, growth of Zika in that area has slowed in recent weeks. Though the mosquito vector species can tolerate colder regions of the country—including the Midwest—the yearly cycle of seasons and thinner mosquito densities make it unlikely for the virus to spread north and inland.

Despite stalled diffusion within continental borders, the Zika virus has reached near-epidemic status elsewhere in the United States. Nearly twenty thousand cases have been reported in surrounding territories, such as Puerto Rico and the Virgin Islands. The virus flourishes in these warmer locales and is projected to do so for some time to come.

Although it doesn't affect our lives directly, it is important to minimize the spread of Zika anywhere. Regular screens of bug spray and long-sleeved clothing can significantly reduce the risk of infection and transmission while travelling to affected areas. On a larger scale, there are many ways to contribute to global efforts working toward worldwide prevention of the mosquito-borne illness. With just the click of a mouse, one can make a small monetary donation to disease-containment organizations like the CDC Foundation and the National Institutes of Health that enables them to respond promptly and effectively. Funding of research leads to innovative methods of combating the epidemic such as genetic engineering and radiation treatment that disrupts the reproduction of the mosquitoes. Although our day-to-day lives may not be immediately complicated by the disease, it is still our responsibility to give a hand to those whose lives are. Our collective efforts gives us all a sense of community in our ever-diversifying world. We break down our differences and stand together against a common enemy.



## What you need to know about Zika

The spread of the Zika virus and its effect on pregnant women are of great concern.



### HOSPITALIZATION IS UNCOMMON

- The illness is usually mild with symptoms lasting for several days to a week.
- Symptoms typically begin 2 to 7 days after being bitten by an infected mosquito.
- Watch for fever with joint, muscle, or eye pain, or a rash.



### PREVENTIVE MEASURES

In the danger zones, protect from mosquito bites:

#### Children



Cover crib, stroller with mosquito netting.

#### Clothing



Treat shoes, socks, clothing with permethrin.

#### Home



Use screens on windows and doors. Remove standing water.

#### Repellent



Reapply insect repellent every few hours.

SOURCE: Centers for Disease Control and Prevention

AP



# UNDERSTANDING HEALTH CARE TO UNDERSTAND YOUR NEIGHBOR

So you've heard about **Obamacare** (which is actually the Affordable Care Act)... It changes a lot of things about health care. One of its main goals is to provide access and coverage to all.



## HOW CAN PEOPLE ACCESS HEALTH CARE?

### 1 Federal Programs

**Medicare:** Takes care of the elderly and those suffering from End Stage Renal Disease. Medicare A, B, C and D are all different. Medicare alone usually is not enough to cover all the costs of health care that the elderly incur.

**Medicaid:** Covers vulnerable populations who are near the federal poverty line. Not all states have expanded Medicaid (including Missouri), which has led to a gap in coverage. This gap includes people who earn too much to be eligible for Medicaid but do not earn enough to be eligible for subsidies. This leaves people behind and does not achieve the goal of increasing access.

**CHIP:** Not the chocolate kind--the Children's Hospital Insurance Program kind. CHIP is a federally-mandated, state-run program that covers kids who are not eligible for Medicaid but do not have access to private insurance.

### 2 Employer Sponsored Health & Private Insurance

Under the ACA, people are able to stay under their parents' health insurance until the age of **26!** This is a major win for students who are continuing their education!

### *But hold up...what's the Marketplace?*

The **Marketplace** is a tool that Americans can use to buy insurance. The exchanges allow them to enter information about themselves and see how much different plans would cost. The information they enter, though, does not include information about how healthy they are or if they have pre-existing conditions. This means that people who are sick cannot be denied coverage! This is a major achievement of the ACA.

## ...AND WHY DOES THIS ALL MATTER?

The U.S. spends more of its GDP on health care than any other nations. America is one of the only places where someone can go bankrupt because of medical bills. Not everyone has access to care, even if they need it.

Understanding the health needs and difficulties that others experience can help us to better relate to one another and empathize with our neighbor. This understanding prompts us to reshape health reform in the coming years in order to create a system that supports us and our neighbors.





# OUR MISSION

We are already one, but imagine that we are not. OneWorld exists to rediscover that, while we are many in our cultures, religions and struggles, we are one in our common humanity. We yearn to remove the barriers of ignorance and injustice because the most basic and unchanging truth that unites us is the infinite value of the human person. OneWorld emphasizes this unity by raising awareness of social injustice, inspiring action and transforming our hearts, minds and society

## THANK YOU TO OUR SPONSORS

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STUDENT  
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Center for Service  
and Community Engagement  
Serve • Learn • Engage



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"I want you to be concerned about your  
next door neighbor. Do you know your  
next door neighbor?"

- Mother Teresa